

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF INDIANA

Case number (if known) Chapter **11**☐ Check if this an amended filing

## Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

06/24

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1.	<b>Debtor's name</b>	<u>Coat Check Coffee LLC</u>	
2.	<b>All other names debtor used in the last 8 years</b> Include any assumed names, trade names and <i>doing business as</i> names		
3.	<b>Debtor's federal Employer Identification Number (EIN)</b>	<u>81-4110437</u>	
4.	<b>Debtor's address</b>	<b>Principal place of business</b>  <u>401 E Michigan St</u> <u>Indianapolis, IN 46204</u> Number, Street, City, State & ZIP Code  <u>Marion</u> County	<b>Mailing address, if different from principal place of business</b>  <u>328 N. Layman Avenue</u> <u>Indianapolis, IN 46219</u> P.O. Box, Number, Street, City, State & ZIP Code  <b>Location of principal assets, if different from principal place of business</b>  _____ Number, Street, City, State & ZIP Code
5.	<b>Debtor's website (URL)</b>	<u>https://coatcheckcoffee.com/</u>	
6.	<b>Type of debtor</b>	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____	

Debtor **Coat Check Coffee LLC**  
Name

Case number (if known)

**7. Describe debtor's business** A. *Check one:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. *Check all that apply*

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

**7225****8. Under which chapter of the Bankruptcy Code is the debtor filing?***Check one:*

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. *Check all that apply:*

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725 (amount subject to adjustment on 4/01/25 and every 3 years after that).
- ☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District \_\_\_\_\_  
District \_\_\_\_\_When \_\_\_\_\_  
When \_\_\_\_\_Case number \_\_\_\_\_  
Case number \_\_\_\_\_

Debtor **Coat Check Coffee LLC**  
Name

Case number (if known)

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- ☐ No  
☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	<b>Strange Bird LLC</b>	Relationship	<b>CCC is partial owner</b>
District		When	
		Case number, if known	

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? \_\_\_\_\_

- ☐ It needs to be physically secured or protected from the weather.

- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

- ☐ Other \_\_\_\_\_

**Where is the property?** \_\_\_\_\_

Number, Street, City, State & ZIP Code

**Is the property insured?**

☐ No

☐ Yes. Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

### Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☒ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☒ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor

Coat Check Coffee LLC

Case number (if known)

Name

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **Coat Check Coffee LLC**  
Name

Case number (if known)

**Request for Relief, Declaration, and Signatures****WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **August 28, 2024**  
MM / DD / YYYY**X /s/ Neal Warner**

Signature of authorized representative of debtor

**Neal Warner**

Printed name

Title **Co-Owner****18. Signature of attorney****X /s/ Jason T. Mizzell**

Signature of attorney for debtor

Date **August 28, 2024**

MM / DD / YYYY

**Jason T. Mizzell 30038-53**

Printed name

**Kroger, Gardis & Regas, LLP**

Firm name

**111 Monument Circle****Suite 900****Indianapolis, IN 46204**

Number, Street, City, State &amp; ZIP Code

Contact phone **317-692-9000**Email address **jmizzell@kgirlaw.com****30038-53 IN**

Bar number and State

**Fill in this information to identify the case:**Debtor name Coat Check Coffee LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on August 28, 2024**X /s/ Neal Warner**

Signature of individual signing on behalf of debtor

**Neal Warner**

Printed name

**Co-Owner**

Position or relationship to debtor

**Fill in this information to identify the case:**

Debtor name **Coat Check Coffee LLC**  
 United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**  
 Case number (if known): \_\_\_\_\_

☐ Check if this is an  
 amended filing

**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
American Express PO Box 6031 Carol Stream, IL 60197		credit card purchases (Lowes Business reward card))				\$18,594.11
Capital One PO Box 30285 Salt Lake City, UT 84130		credit card purchases (Small Victories card)				\$12,781.75
Chase Bank PO Box 6294 Carol Stream, IL 60197		CCC credit card				\$14,700.95
Chase Bank PO Box 6294 Carol Stream, IL 60197		CCC Roasting LLC;				\$13,591.15
Chase Bank PO Box 6294 Carol Stream, IL 60197		bakery credit card				\$10,639.41
Chase Bank PO Box 6294 Carol Stream, IL 60197		Provider credit card				\$19,590.86
Chef's Warehouse Midwest, LLC 100 East Ridge Road Ridgefield, CT 06877		CCC Baking d/b/a Landlocked Baking				\$24,364.51
Credit Key 145 S. Fairfax Avenue, Suite 200 Los Angeles, CA 90036		SVH credit card				\$11,132.47

Debtor **Coat Check Coffee LLC**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
De La Finca Coffee Company LLC 108 Thomas Mill Rd. Suite 100 Holly Springs, NC 27540		CCC Roasting LLC				\$14,747.35
FNBO PO Box 3128 Omaha, NE 68103		Credit Card - CCC webstraunt				\$10,462.57
Indiana Department of Revenue 100 North Senate Avenue N-240 MS 108 Indianapolis, IN 46204		Possible withholding tax obligations				\$11,000.00
Indiana Department of Revenue 100 North Senate Avenue N-240 MS 108 Indianapolis, IN 46204		Sales Tax-Responder				\$17,083.52
Indiana Department of Revenue 100 North Senate Avenue N-240 MS 108 Indianapolis, IN 46204		Sales Tax- CCC Cafe LLC				\$40,661.55
Indiana Department of Revenue 100 North Senate Avenue N-240 MS 108 Indianapolis, IN 46204		Sales Tax-Provider				\$31,091.11
Indiana Department of Revenue 100 North Senate Avenue N-240 MS 108 Indianapolis, IN 46204		Sales Tax-Landlocked				\$28,024.40
Internal Revenue Service 575 N. Pennsylvania Street Stop SB380 Indianapolis, IN 46204		Possible withholding tax obligations				\$11,000.00



Debtor **Coat Check Coffee LLC**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
North Star Leasing 747 Pine St. #201 Burlington, VT 05401		Machine Rental - Brewing Equipment - Spike Nano				\$13,000.00
Third Street Ventures, LLC 6630 E. 75th Street, Suite 214 Indianapolis, IN 46250		Business loan				\$60,000.00
U.S. Small Business Adminstration 2 North Street Birmingham, AL 35203		See attached UCC Financing Statement		\$519,931.41	Unknown	\$470,000.00
What Chef's Want 940 West 5th St. Cincinnati, OH 45203		CCC Baking LLC d/b/a Landlocked Baking				\$11,634.65

**Fill in this information to identify the case:**Debtor name **Coat Check Coffee LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **253,320.00****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **253,320.00****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **943,520.56****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **144,962.42****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **1,068,160.82****4. Total liabilities** .....  
Lines 2 + 3a + 3b\$ **2,156,643.80**

## Fill in this information to identify the case:

Debtor name Coat Check Coffee LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206A/B

## Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

## 1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (*Identify all*)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Stockyard Bank (Coat Check Coffee)Checking6796\$15.004. **Other cash equivalents** (*Identify all*)5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$15.00**Part 2: Deposits and Prepayments**

## 6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.  
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. \$1500 security deposit for warehouse rental for Debtor. Debtor does not believe this is recoverable.\$1,500.007.2. \$2000 security deposit for landlord for Provider Coffee. Debtor does not believe this is recoverable.\$2,000.00

Debtor Coat Check Coffee LLC Case number (If known) \_\_\_\_\_  
 Name

7.3. **\$1000 security deposit for landlord for Coat Check. Debtor does not believe this is recoverable.** **\$1,000.00**

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**  
 Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$4,500.00**

**Part 3: Accounts receivable**

10. **Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.  
☐ Yes Fill in the information below.

**Part 4: Investments**

13. **Does the debtor own any investments?**

- ☐ No. Go to Part 5.  
☒ Yes Fill in the information below.

			Valuation method used for current value	Current value of debtor's interest
14.	<b>Mutual funds or publicly traded stocks not included in Part 1</b> Name of fund or stock:			
15.	<b>Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture</b> Name of entity:	% of ownership		
	CCC Baking LLC d/b/a Landlocked Baking Company, Provider Coffee LLC, Responder LLC d/b/a Chalet Brewing, Small Victories Hospitality LLC, CCC Irvington LLC, CCC Builders, LLC, CCC Park West LLC, CCC Cafe LLC, CCC Roasting LLC d/b/a Certain Feelings Coffee.			
15.1.	<b>Liabilities outweigh assets for all entities and most are not operating.</b>	<b>100</b> %	<b>Liquidation</b>	<b>Unknown</b>
15.2.	<b>Strange Bird, LLC</b>	<b>80</b> %	<b>Liquidation</b>	<b>Unknown</b>

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**  
 Describe:

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

**\$0.00**

**Part 5: Inventory, excluding agriculture assets**

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.

Debtor Coat Check Coffee LLC  
Name

Case number (If known) \_\_\_\_\_

☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale Supplies and/or goods for the businesses including coffee and paper goods		\$0.00	Liquidation	\$10,000.00

22. Other inventory or supplies

23. Total of Part 5.

Add lines 19 through 22. Copy the total to line 84.

\$10,000.00

24. Is any of the property listed in Part 5 perishable?

☐ No☒ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☐ No☒ Yes. Book value

4,000.00

Valuation method

Current Value

4,000.00

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No☐ Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.☐ Yes Fill in the information below.**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Office furniture - see attached list	\$5,000.00		\$5,000.00
40.	Office fixtures Office Decor	\$5,000.00		\$5,000.00

41. Office equipment, including all computer equipment and communication systems equipment and software

Debtor Coat Check Coffee LLC Case number (If known) \_\_\_\_\_

Name

**Electronics and Point-of-Sale equipment - see attached list****Unknown****\$5,180.00****Provider Equipment - Office Furniture, Computer Equipment, Kitchen Equipment, etc. See Attached Equipment List****\$42,130.00****\$42,130.00****CCC Cafe Equipment - Kitchen Equipment, Office Furniture, etc. See attached Equipment List****\$37,520.00****\$37,520.00****Restaurant Equipment - Tables, Chairs, appliances, etc. - See Attached Equipment List****\$53,975.00****\$53,975.00**

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

**\$148,805.00**

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No☐ Yes**Part 8: Machinery, equipment, and vehicles**

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

☐ No. Go to Part 9.☒ Yes Fill in the information below.**General description**

Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)

**Net book value of debtor's interest**  
(Where available)**Valuation method used for current value****Current value of debtor's interest**

47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

48. **Watercraft, trailers, motors, and related accessories** *Examples:* Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**  
**Refrigeration**

**\$50,000.00****\$50,000.00****Bellweather Coffee Roaster****\$0.00****\$0.00****Mod Bar Espresso Machine****\$10,000.00****\$10,000.00**

Debtor Coat Check Coffee LLC Case number (If known) \_\_\_\_\_  
NameEversys Espresso Maching \$20,000.00 \$20,000.0051. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$80,000.0052. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒
- No
- 
- ☐
- Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒
- No
- 
- ☐
- Yes

**Part 9: Real property**54. **Does the debtor own or lease any real property?**

- ☒
- No. Go to Part 10.
- 
- ☐
- Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☐
- No. Go to Part 11.
- 
- ☒
- Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. <b>Patents, copyrights, trademarks, and trade secrets</b>			
61. <b>Internet domain names and websites</b>			
62. <b>Licenses, franchises, and royalties</b>			
63. <b>Customer lists, mailing lists, or other compilations</b>			
64. <b>Other intangibles, or intellectual property</b> <b>Name and trade dress specifically for Coat Check Coffee and Provider; Social Media, IP, Goodwill, etc.</b>	<u>\$10,000.00</u>		<u>\$10,000.00</u>

65. **Goodwill**66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$10,000.0067. **Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?)**

- ☒
- No
- 
- ☐
- Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

- ☒
- No
- 
- ☐
- Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

- ☒
- No

Debtor Coat Check Coffee LLC  
Name

Case number (If known) \_\_\_\_\_

☐ Yes

**Part 11: All other assets**

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.

☐ Yes Fill in the information below.



Debtor **Coat Check Coffee LLC**  
Name

Case number (If known)

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<b>\$15.00</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$4,500.00</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<b>\$0.00</b>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<b>\$0.00</b>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<b>\$10,000.00</b>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<b>\$0.00</b>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<b>\$148,805.00</b>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<b>\$80,000.00</b>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<b>\$0.00</b>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<b>\$10,000.00</b>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<b>\$0.00</b>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<b>\$253,320.00</b>	<b>\$0.00</b>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<b>\$253,320.00</b>

Milk Fridge			TRUE	T-12G	7024873	2011	Coat Check	\$	300.00
2 door back-bar			Avantco	17UBB60HC	9133170046	2019	Coat Check	\$	650.00
Small Merchandiser			Unknown	Unknown	Unknown	2017	Coat Check	\$	200.00
Flip Top Prep Fridge with overshelf			Turbo Air	MST-36	MS3TC01012	2019	Coat Check	\$	1,600.00
Keg Fridge			Beverage Air	BB58-1-B-ALT	12115507	2017	Coat Check	\$	2,100.00
Chest Freezer			Electrolux	FFC15C4CW0	WB34819117	2019	Coat Check	\$	100.00
2 door back-bar			Avantco	178UBB60HC	9133170046	2018	Coat Check	\$	600.00
Reach in			TRUE	T-23	8158607	2015	Coat Check	\$	800.00
Batch Brewer	Curtis	G4TP1T10A3100		13401071			Coat Check	\$	1,100.00
Espresso Mach	La Marzocco	Linea PB 2AV		PB005492			Coat Check	\$	7,000.00
Grinder (Espresso)	Mahlkonig	E80 Supreme		649680			Coat Check	\$	2,500.00
Grinder (Espresso)	Mazzer	Luigi Spa/Lux D		1719711			Coat Check	\$	750.00
Grinder (Batch)	Mahlkonig	EK43		619887			Coat Check	\$	2,500.00
Reverse Osmosis	GC Water	NEX 500 Formulador					Coat Check	\$	1,500.00
Oven	Moffat	Turbofan	E32D5				Coat Check	\$	1,000.00
Speaker	Sonos Play 5 Speaker						Coat Check	\$	100.00
Speaker	Sonos Play 5 Speaker						Coat Check	\$	100.00
Speaker	Sonos Play 3 Speaker						Coat Check	\$	100.00
Amplifier	Sonos Connect Amp						Coat Check	\$	100.00
Hi-Fi Speaker	2 Specimen Audio Hi-Fi Speakers						Coat Check	\$	2,700.00
POS Terminal	Toast POS Register						Coat Check	\$	500.00
POS Printer	Toast POS Printers						Coat Check	\$	200.00
Hand Sink							Coat Check	\$	50.00
Hand Sink							Coat Check	\$	50.00
3 Bay Warewashing Sink							Coat Check	\$	1,000.00
Commercial Microwave							Coat Check	\$	500.00
Toaster							Coat Check	\$	200.00
1 Stainless Steel ice bin							Coat Check	\$	50.00
1 white rolling shelf							Coat Check	\$	25.00
Wire Rack Rolling							Coat Check	\$	50.00
Wire Rack Rolling							Coat Check	\$	50.00
Prep Table							Coat Check	\$	75.00
Prep Table							Coat Check	\$	100.00
Prep Table							Coat Check	\$	100.00
Bar Rail							Coat Check	\$	10.00
Shelving Rack							Coat Check	\$	25.00
Shelving Rack							Coat Check	\$	25.00
Shelving Rack							Coat Check	\$	25.00
Shelving Rack							Coat Check	\$	25.00
Shelving Rack							Coat Check	\$	25.00
Shelving Rack							Coat Check	\$	25.00
Shelving Rack							Coat Check	\$	25.00
Shelving Rack							Coat Check	\$	25.00
Shelving Rack							Coat Check	\$	25.00
Shelving Rack							Coat Check	\$	25.00
Custom Stained Glass Coat Check Logo					Coat Check	1.00	\$300.00		\$300.00
Custom Backbar Floating Shelves					Coat Check	1.00	\$50.00		\$50.00
6 Silver Stools					Coat Check	1.00	\$200.00		\$200.00
6 Custom Made Service Counter Modules					Coat Check	6.00	\$350.00		\$2,100.00
Plumbing and Discharge Pump									\$250.00
Condiment Cart					Coat Check	1.00	\$50.00		\$50.00
Pastry Case					Coat Check	2.00	\$200.00		\$400.00

Tap Tower	6 Line Tap tower with Pulls	Coat check	\$ 200.00
Cold Coffee Brewer	SS Brewtech Cold Coffee Bucket	Coat Check	\$ 200.00
	Nitrogen Gas Cylender	Coat Check	\$ 100.00
	Carbon Dioxide Gas Cylander	Coat Check	\$ 100.00
Coffee Scales Acia			\$ 300.00
Espresso Distri Ona Coffee			\$ 50.00
Espresso Tamper Push Tamp			\$ 50.00
Pitcher Rinser			\$ 100.00
Tamp Mat			\$ 10.00
5 gallon coffee Cambro Containers			\$ 250.00
Airpots			\$ 150.00
Single Bay Bar Sink			\$ 100.00
Mop Sink			\$ 100.00
Small Ice Bin			\$ 50.00
Coffee Smallware	Steaming Pitchers, espresso pitchers, growlers, spoons, whisk, condiment containers, matcha tools		\$ 250.00
Barware	Cocktail Kingdc5 Shaker Tin Sets, jiggers, barsspoons, strainers, mesh strainers, A Bar Above Mats		\$ 350.00
Glassware	NotNeutral Coffee Cups, Cocktail Glasses, Pint Glasses, Espresso Glassware,		\$ 750.00
Food Prep Smallware	Food containers, tools, sauce bottles, knives, plates, napkin dispensers, 1/6 pans, sheet pans		\$ 1,000.00
Rapid Cook Oven	Merrychef		\$ 1,000.00
Deposit Safe			\$ 20.00
Change Safe			\$ 20.00
Filing Cabinet			\$ 10.00
			\$ 37,520.00

Type	Manufacturer	Configuration	Model	S/N	Year	Location	estimated value
Large Reach-in	Beverage Air	1 door	SR1HC-1S	0035513-30995-B	2023	Provider	\$ 3,000.00
Flip Top Prep Fridge	Turbo Air	2 door	MST-36-N6	MS3T0CN5040	2019	Provider	\$ 2,100.00
Under Counter	Delfield	2 door	UC4048P-STAR	1.70515E+12	2017	Provider	\$ 1,200.00
Chest Freezer						Provider	\$ 100.00
Walk-in Cooler	Kolpak				2018	Provider	\$ 7,600.00
Work Top	1 Door	Delfield	406-STAR2	0606036102240-T	2015	Provider	\$ 500.00
Espresso Machine	La Marzocco		Linea Classic AV 3-group			Provider	\$ 4,500.00
Batch Coffee Brewer	Curtis		G4TP1S63A3	13695102		Provider	\$ 900.00
Grinder (Espresso)	Mahlkonig		E80 Supreme	649670		Provider	\$ 2,300.00
Grinder (Batch)	Mahlkonig		EK43/12	571253		Provider	\$ 2,500.00
Reverse Osmosis W/ GC Water			NEX 500 System			Provider	\$ 1,500.00
Coffee Scales	Acia						\$ 300.00
Espresso Distributor	Ona Coffee						\$ 50.00
Espresso Tamper	Push Tamp						\$ 50.00
Pitcher Rinser							\$ 100.00
Tamp Mat							\$ 10.00
2 bay sink							\$ 300.00
Hand Sink							\$ 50.00
Coffee Smallwares	Steaming Pitchers, espresso pitchers, air pots, spoons, whisk, condomint containers, matcha t						\$ 250.00
Barware	Cocktail Kingdc 10 Shaker Tin Sets, 5 jiggers, barsspoons, strainers, mesh strainers, A Bar Ab						\$ 350.00
Glassware	NotNeutral Coffee Cups, Cocktail Glasses, Pint Glasses, Espresso Glassware,						\$ 750.00
Food Prep Smallwar	Food containers, tools, sauce bottles, knives, plates, napkin dispensers, 1/6 pans, sheet pans						\$ 1,000.00
Rapid Cook Oven	Merrychef Eikon E3		e3CXXMV6DFI	171121309020	2018	Provider	\$ 1,000.00
Network Rack						Provider	\$ 10.00
Battery Backup	Tripp Lite					Provider	\$ 25.00
POE Network Switch	Netgear GC510PP					Provider	\$ 25.00
Network Cooling Fan						Provider	\$ 25.00
Router	Netgear		BR 500			Provider	\$ 100.00
Patch Panel						Provider	\$ 25.00
Wireless Access Poi	Netgear Insight					Provider	\$ 25.00
Speaker	Sonos		play 5 speaker			Provider	\$ 100.00
Speakers	Pioneer		Vintage Wooden, Restored			Provider	\$ 250.00
Amplifier	Sonos		Connect Amp			Provider	\$ 100.00
Subwoofer	Dayton Audio					Provider	\$ 100.00
Toast Point-of-Sale t	Toast					Provider	\$ 500.00
Cash Drawer	Toast					Provider	\$ 25.00
Point of Sale Printer	Star					Provider	\$ 100.00
Point of Sale Printer	Star					Provider	\$ 100.00
Brother	Laser Printer					Provider	\$ 25.00
Deposit Safe						Provider	\$ 20.00
Change Safe						Provider	\$ 20.00
Key Box						Provider	\$ 5.00
Filing Cabinet						Provider	\$ 10.00
Shelving Rack	Office Coffee Shelf					Provider	\$ 25.00
Shelving Rack	Office Paper Shelf					Provider	\$ 25.00
Shelving Rack	Office Rolling Shelf					Provider	\$ 25.00
Shelving Rack	Office Small Shelf					Provider	\$ 25.00
Shelving Rack	Tall Cup Storage next to heater					Provider	\$ 50.00
Shelving Rack	White Cup Storage					Provider	\$ 50.00
Shelving Rack	Cup Storage B: between door and Black Cabinet					Provider	\$ 25.00
Shelving Rack	Cup Storage B: Near door					Provider	\$ 25.00
Shelving Rack	Cup Storage Back					Provider	\$ 25.00

Shelving Rack	Inside Back Closet	Provider	\$	25.00
Shelving Rack	Inside Back Closet	Provider	\$	25.00
Shelving Rack	Inside Walk in cooler	Provider	\$	25.00
Shelving Rack	Inside Walk in cooler	Provider	\$	50.00
Shelving Rack	Inside walk in cooler near door	Provider	\$	25.00
Black Storage Cabinet	Back Hallway	Provider	\$	30.00
Black Storage Cabinet	Back Hallway	Provider	\$	30.00
Black Storage Cabinet	Restroom	Provider	\$	10.00
Wooden Cabinet	Above Drinking Fountain	Provider	\$	75.00
Shelving Rack	Bus Station	Provider	\$	25.00
Shelving Rack	Under Sink	Provider	\$	10.00
Bar Rail		Provider	\$	5.00
Shelving Rack	Small White Wire Shelves	Provider	\$	25.00
Shelving Rack	POS Rack	Provider	\$	25.00
Mop Bucket		Provider	\$	5.00
Trash Cans	10 total	Provider	\$	100.00
Work Table Wood Top	Food Prep	Provider	\$	150.00
Work Table Wood Top	Coffee Station	Provider	\$	150.00
Micromatic 10 Tap tower with Custom Pulls, matching glass rinser and drip tray		Provider	\$	350.00
Glycol Cooling system for Draft System		Provider	\$	950.00
McDermott Beer Gas Blending Unit		Provider	\$	200.00
Micromatic 13 line custom blend keg couplers in walk-in		Provider	\$	100.00
Nitrogen Gas Cylinder		Provider	\$	100.00
Carbon Dioxide Gas Cylinder		Provider	\$	100.00
SS Brewtech Cold Coffee Bucket		Provider	\$	200.00
Stainless Steel ice bin		Provider	\$	50.00
Commercial Microwave		Provider	\$	100.00
"Nice Weather" Neon Sign	Provider	1.00	\$200.00	\$200.00
20 live plants	Provider	1.00	\$100.00	\$100.00
1 32" TV	Provider	1.00	\$50.00	\$50.00
Phillips Hue Lighting System	Provider	1.00	\$100.00	\$100.00
Semi-circular Leather Chairs	Provider	4.00	\$100.00	\$400.00
4 top wooden dining table mounted to column	Provider	1.00	\$150.00	\$150.00
Brass Tables	Provider	4.00	\$200.00	\$800.00
Brass and Leatherette Chairs for Brass Tables	Provider	8.00	\$50.00	\$400.00
metal bar stools	Provider	10.00	\$50.00	\$500.00
Wood and metal backless bar stools	Provider	8.00	\$50.00	\$400.00
mid-century style leather chairs	Provider	4.00	\$100.00	\$400.00
Live edge 4 seat custom table	Provider	1.00	\$300.00	\$300.00
leather bar stools	Provider	6.00	\$100.00	\$600.00
6-seat bar-height custom table	Provider	1.00	\$200.00	\$200.00
pastry cases	Provider	3.00	\$200.00	\$600.00
Exterior metal tables	Provider	8.00	\$25.00	\$200.00
metal barstools with backs	Provider	6.00	\$10.00	\$60.00
exterior metal chairs	Provider	32.00	\$10.00	\$320.00
exterior wood and metal table	Provider	1.00	\$150.00	\$150.00
antique wooden storage shelf	Provider	1.00	\$50.00	\$50.00
Stainless steel prep table bussing station	Provider	1.00	\$150.00	\$150.00
Office Desk with Rolling Stool	Provider	1.00	\$75.00	\$75.00
3-tier white rolling cart	Provider	1.00	\$20.00	\$20.00
wooden high chairs	Provider	2.00	\$30.00	\$60.00
Work Desk in seating area with Outlet and 2 tufted stools	Provider	1.00	\$200.00	\$200.00
Extension Ladder	Provider	1.00	\$100.00	\$100.00
12 ft Ladder	Provider	1.00	\$150.00	\$150.00
Table height Stools in foyer	Provider	4.00	\$20.00	\$80.00

Round Tables in Foyer	Provider	2.00	\$50.00	\$100.00
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\$ 42,130.00

Type	Manufacturer		S/N	Year	Location	estimated value	
Work Top	TRUE	TUC-27-HC	8683574	2015	Storage Unit	\$ 900.00	
Solid Door Reach in	TRUE	T-23-HC	10353552	2017	Storage Unit	\$ 900.00	
Small Reach in	Avantco	178A12RHC	7712172121071015	2022	Storage Unit	\$ 900.00	
GE Upright Freezer						\$ 50.00	
Reach in	Turbo Air	TSR-23	002235002MR	2015	Storage Unit	\$ 400.00	
Work Top	Turbo Air	JUR-36	JU3RB04010	2015	Storage Unit	\$ 400.00	
Reach in	Turbo Air	TSR-23SD	DR23SB002	2015	Storage Unit	\$ 400.00	
Undercounter	Delfield				Storage Unit	\$ 400.00	
	TRUE	GDM-23	1-2186962		Storage Unit	\$ 400.00	
Reach in	Avantco	small unit		2023	Storage Unit	\$ 1,100.00	
Glass Front	TRUE	GDM-10	7255779	2011	Storage Unit	\$ 200.00	
Ice cream freezer					Storage Unit	\$ 250.00	
Oven	Moffat	Turbofan 32			Storage Unit	\$ 1,900.00	
Tap Fridge	Delfield				Storage Unit	\$ 400.00	
Grinder (Batch)	Grindmaster				Storage Unit	\$ 250.00	
Grinder (Batch)	Mahlkonig				Storage Unit	\$ 2,500.00	
Espresso Machine	Rancilio				Storage Unit	\$ 1,700.00	
Grinder (Espresso)	Mazzer				Storage Unit	\$ 750.00	
Batch Brewer	3Temp				Storage Unit	\$ 500.00	
Espresso Machine	Modbar				Storage Unit	\$ 3,000.00	
Steam Module	Modbar				Storage Unit	\$ 3,000.00	
Grinder (Espresso)	Mazzer				Storage Unit	\$ 750.00	
Grinder (Espresso)	Mazzer				Storage Unit	\$ 750.00	
Grinder (Batch)	Mahlkonig				Storage Unit	\$ 1,500.00	
Espresso Machine	Nuova Simonelli				Storage Unit	\$ 750.00	
Espresso Machine	Nuova Simonelli				Storage Unit	\$ 200.00	
Espresso Machine	Modbar				Storage Unit	\$ 1,000.00	
Espresso Machine	Eversys				Storage Unit	\$ 2,500.00	
Batch Brewer	Curtis				Storage Unit	\$ 900.00	
Reverse Osmosis Wa	GC Water				Storage Unit	\$ 1,500.00	
Reverse Osmosis Wa	GC Water				Storage Unit	\$ 1,500.00	
Oven	E32D5				Landlocked	\$ 1,000.00	
Oven	E32D5				Landlocked	\$ 1,000.00	
Oven	E32D5				Landlocked	\$ 700.00	
PFA Rapid Fryer				2021	Storage Unit	\$ 3,000.00	
Oven					Storage Unit	\$ 1,000.00	
Toaster	WCT850				Storage Unit	\$ 50.00	
Scale	GSP30B				Storage Unit	\$ 150.00	
Rethermalizer	FSPW-SS	04K16F			Storage Unit	\$ 25.00	
Egg Cooking Station	ES-604CV	9089018			Storage Unit	\$ 150.00	
Convection Oven 1/4 Sheet Pan					Storage Unit	\$ 50.00	
Panini Press			141218			Storage Unit	\$ 50.00
Toaster					Storage Unit	\$ 50.00	
Food Warmer				2018	Storage Unit	\$ 50.00	
Food Warmer					Storage Unit	\$ 50.00	
Bagel Slicer	1266/092512				Storage Unit	\$ 1,300.00	
Panini Press					Storage Unit	\$ 50.00	
Exhaust Fan					Storage Unit	\$ 250.00	
Ventless Hood	Q311210201		2002			Storage Unit	\$ 300.00
Range/Oven	351S36G12N		2021			Storage Unit	\$ 500.00
Prep Table					Storage Unit	\$ 50.00	
Prep Table					Storage Unit	\$ 50.00	
23 wire racks					Storage Unit	\$ 1,000.00	

Prep Table	Storage Unit	\$	25.00
French Fry Warmer	Hatco Glo-Ray	Storage Unit	\$ 1,700.00
Toaster	Ava Toast Con	Storage Unit	\$ 50.00
Vent Hood	Broan Vent Ho	Storage Unit	\$ 25.00
Shelving Rack	Storage Unit	\$	25.00
Shelving Rack	Storage Unit	\$	25.00
Shelving Rack	Storage Unit	\$	25.00
Prep Table	Storage Unit	\$	300.00
Sink	Storage Unit	\$	100.00
Microwave	Storage Unit	\$	250.00
Microwave	Storage Unit	\$	250.00
Ice Bin	Storage Unit	\$	100.00

Pop Corn Machine	Storage Unit	\$	75.00
Bar-Maid Glass Dryer	Storage Unit	\$	300.00
Bar-Maid Glass Washer	Storage Unit	\$	100.00
Hand Sink	Storage Unit	\$	50.00
2 bay bar sink		\$	50.00

Custom Stained Glass Entryway window	Storage Unit	1.00	\$200.00	\$200.00
Taxidermy Goat Head	Storage Unit	1.00	\$500.00	\$500.00
Skis	Storage Unit	1.00	\$200.00	\$200.00
Antler Chandelier	Storage Unit	1.00	\$100.00	\$100.00
String Lights/Flags	Storage Unit	1.00	\$50.00	\$50.00
5 pieces of Stained Glass	Storage Unit	1.00	\$100.00	\$100.00
Neon Open Sign	Storage Unit	1.00	\$100.00	\$100.00
Wire Rack for POS	Storage Unit	1.00	\$50.00	\$50.00
Bar Height 2-top Round Tables	Storage Unit	3.00	\$100.00	\$300.00
Gray/Wood Stools	Storage Unit	6.00	\$50.00	\$300.00
Brown Dining Chair	Storage Unit	6.00	\$100.00	\$600.00
Host Station	Storage Unit	1.00	\$50.00	\$50.00
Wire Bus Tub Rack	Storage Unit	1.00	\$50.00	\$50.00

Element 7	Storage	Nitrogen Generator	Storage Unit	\$	250.00
2 BBL fermenter			Storage Unit	\$	500.00
LG 2516ER				\$	500.00
Dining Tables and Legs				\$	1,000.00
Dining Chairs and Stools				\$	400.00
Office Furniture				\$	1,000.00
Prep Table			Warehouse	\$	50.00
Filing Cabinets				\$	500.00
		3 bay bar sink	Warehouse	\$	50.00
20 Quart Mixer	Hobart			\$	1,200.00

\$ 53,975.00



**Fill in this information to identify the case:**Debtor name **Coat Check Coffee LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
<b>2.1</b>	<b>Alliance Funding</b> Creditor's Name  <b>17542 17th St. Suite 200</b> <b>Tustin, CA 92780</b> Creditor's mailing address  Creditor's email address, if known  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b> <b>0437</b> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>Bellweather Coffee Roaster</b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$6,000.00</b>	<b>\$0.00</b>
<b>2.2</b>	<b>Cloud Fund/Delta Funding</b> Creditor's Name <b>400 Rella Blvd. Suite 165-101</b> <b>Suffern, NY 10901</b> Creditor's mailing address  Creditor's email address, if known  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b> <b>0437</b> <b>Do multiple creditors have an interest in the same property?</b>	Describe debtor's property that is subject to a lien <b>See attached UCC financing statement (Provider Coffee LLC) - All Assets</b>  Describe the lien <b>Non-Purchase Money Security</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply	<b>\$20,991.00</b>	<b>Unknown</b>

Debtor	<b>Coat Check Coffee LLC</b>	Case number (if known) _____
	Name	
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed

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2.3	<b>Corporation Service Company</b> <small>Creditor's Name</small>  <b>PO Box 2576</b> <b>Springfield, IL 62708</b> <small>Creditor's mailing address</small>  <b>UCCSPREP@CSCINFO.COM</b> <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>See attached UCC financing statement (Provider Coffee LLC)</b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	\$0.00
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2.4	<b>Headway Capital</b> <small>Creditor's Name</small> <b>175 W. Jackson Blvd.</b> <b>Suite 1000</b> <b>Chicago, IL 60604</b> <small>Creditor's mailing address</small>  <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>CCC Baking LLC d/b/a Landlocked Baking (bakery line) - All Assets</b>  Describe the lien <b>Merchants Cash Advance</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$67,626.85	Unknown
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2.5	<b>Indiana Department of Revenue</b> <small>Creditor's Name</small> <b>100 North Senate Avenue</b> <b>N-240 MS 108</b> <b>Indianapolis, IN 46204</b> <small>Creditor's mailing address</small>	Describe debtor's property that is subject to a lien   Describe the lien	Unknown	Unknown
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Debtor	<b>Coat Check Coffee LLC</b> <small>Name</small>	Case number (if known)
Creditor's email address, if known  Date debt was incurred  Last 4 digits of account number  Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<b>2.6</b> Intuit Financing Inc. <small>Creditor's Name</small>  <b>2700 Coast Avenue</b> <b>Mountain View, CA 94043</b> <small>Creditor's mailing address</small>  Creditor's email address, if known  Date debt was incurred <b>10/25/20222</b> Last 4 digits of account number  Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>SVH - All Assets</b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$9,677.61</b>  <b>Unknown</b>
<b>2.7</b> Intuit Financing Inc. <small>Creditor's Name</small>  <b>2700 Coast Avenue</b> <b>Mountain View, CA 94043</b> <small>Creditor's mailing address</small>  Creditor's email address, if known  Date debt was incurred  Last 4 digits of account number  Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>CCC Cafe LLC - All Assets</b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$18,743.78</b>  <b>Unknown</b>

Debtor	<b>Coat Check Coffee LLC</b> <small>Name</small>		Case number (if known)
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<b>2.8</b>	<b>National Funding</b> <small>Creditor's Name</small>  <b>9530 Towne Centre Drive San Diego, CA 92121</b> <small>Creditor's mailing address</small>   <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b> <b>6/15/2023</b> <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>CCC Baking LL d/b/a Landlocked Baking - All Assets</b>  Describe the lien <b>Merchants Cash Advance</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$6,076.00</b>	<b>Unknown</b>
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<b>2.9</b>	<b>Navitas Credit Corp.</b> <small>Creditor's Name</small> <b>203 Fort Wade Road, Suite 300 Ponte Vedra, FL 32081</b> <small>Creditor's mailing address</small>   <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>Mod Bar Espresso Machine</b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$6,025.00</b>	<b>\$10,000.00</b>
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<b>2.10</b>	<b>Navitas Credit Corp.</b> <small>Creditor's Name</small> <b>203 Fort Wade Road, Suite 300 Ponte Vedra, FL 32081</b> <small>Creditor's mailing address</small>   <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b>	Describe debtor's property that is subject to a lien <b>Eversys Espresso Maching</b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	<b>\$10,375.00</b>	<b>\$20,000.00</b>
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Debtor **Coat Check Coffee LLC**  
Name

Case number (if known)

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
1 **Neighborhood  
Self-Employment Initiative**

Creditor's Name

**111 Monument Circle, Suite  
1950  
Indianapolis, IN 46204**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**\$7,073.00****Unknown****First Security Interest in all business assets -  
UCC-1**

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

**4/15/2020**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
2 **OnDeck Capital**

Creditor's Name

**1400 Broadway, 22nd Floor  
New York, NY 10018**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**\$57,853.75****Unknown****Provider - All Assets**

Describe the lien

**Merchants Cash Advance**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
3 **Toast, Inc.**

Creditor's Name

**401 Park Drive, Site 801  
Boston, MA 02215**

Describe debtor's property that is subject to a lien

**\$24,087.00****Unknown****Responder LLC and Coat Check Coffee LLC -  
All Assets**

Debtor <b>Coat Check Coffee LLC</b> Name <hr/> Creditor's mailing address <hr/> Creditor's email address, if known <hr/> <b>Date debt was incurred</b> <hr/> <b>Last 4 digits of account number</b> <hr/> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <hr/>	Case number (if known) _____ <hr/> <b>Describe the lien</b> <hr/> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <hr/> <b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">2.1 4</div> <b>Toast, Inc.</b> Creditor's Name <hr/> <b>401 Park Drive, Site 801 Boston, MA 02215</b> Creditor's mailing address <hr/> Creditor's email address, if known <hr/> <b>Date debt was incurred</b> <hr/> <b>Last 4 digits of account number</b> <hr/> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <hr/>	<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;"> <b>Describe debtor's property that is subject to a lien</b>  <b>Coat Check Coffee LLC - All Assets</b>  <hr/> <b>Describe the lien</b>  <hr/> <b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <hr/> <b>As of the petition filing date, the claim is:</b>          Check all that apply  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed       </td> <td style="width: 20%; text-align: right; vertical-align: top;"> <b>\$3,053.71</b>  <hr/> </td> <td style="width: 20%; text-align: right; vertical-align: top;"> <b>Unknown</b>  <hr/> </td> </tr> </table>	<b>Describe debtor's property that is subject to a lien</b> <b>Coat Check Coffee LLC - All Assets</b> <hr/> <b>Describe the lien</b> <hr/> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <hr/> <b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,053.71</b> <hr/>	<b>Unknown</b> <hr/>
<b>Describe debtor's property that is subject to a lien</b> <b>Coat Check Coffee LLC - All Assets</b> <hr/> <b>Describe the lien</b> <hr/> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <hr/> <b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,053.71</b> <hr/>	<b>Unknown</b> <hr/>		

<div style="border: 1px solid black; padding: 2px; display: inline-block;">2.1 5</div> <b>Toast, Inc.</b> Creditor's Name <hr/> <b>401 Park Drive, Site 801 Boston, MA 02215</b> Creditor's mailing address <hr/> Creditor's email address, if known <hr/> <b>Date debt was incurred</b> <hr/> <b>Last 4 digits of account number</b> <hr/> <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <hr/>	<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;"> <b>Describe debtor's property that is subject to a lien</b>  <b>CCC Baking d/b/a Landlocked Baking - All Assets</b>  <hr/> <b>Describe the lien</b>  <hr/> <b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <hr/> <b>As of the petition filing date, the claim is:</b>          Check all that apply       </td> <td style="width: 20%; text-align: right; vertical-align: top;"> <b>\$75,615.80</b>  <hr/> </td> <td style="width: 20%; text-align: right; vertical-align: top;"> <b>Unknown</b>  <hr/> </td> </tr> </table>	<b>Describe debtor's property that is subject to a lien</b> <b>CCC Baking d/b/a Landlocked Baking - All Assets</b> <hr/> <b>Describe the lien</b> <hr/> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <hr/> <b>As of the petition filing date, the claim is:</b> Check all that apply	<b>\$75,615.80</b> <hr/>	<b>Unknown</b> <hr/>
<b>Describe debtor's property that is subject to a lien</b> <b>CCC Baking d/b/a Landlocked Baking - All Assets</b> <hr/> <b>Describe the lien</b> <hr/> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <hr/> <b>As of the petition filing date, the claim is:</b> Check all that apply	<b>\$75,615.80</b> <hr/>	<b>Unknown</b> <hr/>		

Debtor **Coat Check Coffee LLC**

Name

Case number (if known)

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Contingent☐ Unliquidated☐ Disputed2.1  
6**Toast, Inc.**

Creditor's Name

**401 Park Drive, Site 801  
Boston, MA 02215**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**All assets****\$22,791.00****Unknown**

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
7**U.S. Small Business  
Administration**

Creditor's Name

**2 North Street, Suite 320  
Birmingham, AL 35203**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred****Last 4 digits of account number****8202****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**See attached UCC financing statement (CCC Baking LLC)****\$17,627.58****Unknown**

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
8**U.S. Small Business  
Administration**

Creditor's Name

**2 North Street, Suite 320  
Birmingham, AL 35203**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**See attached UCC financing statement (Provider)****\$69,972.07****Unknown**

Describe the lien

Debtor **Coat Check Coffee LLC**  
Name

Case number (if known)

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
9**U.S. Small Business  
Administration**

Creditor's Name

**2 North Street  
Birmingham, AL 35203**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**See attached UCC Financing Statement****\$519,931.41****Unknown**

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

**6/10/2020**

Last 4 digits of account number

**7909**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$943,520.56****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

**Corporate Creations Network Inc.  
8520 Allison POinte Blvd., #220  
Indianapolis, IN 46250**Line **2.14****Corporate Creations Network Inc.  
8520 Allison POinte Blvd., #220  
Indianapolis, IN 46250**Line **2.15****Corporate Creations Network Inc.  
8520 Allison POinte Blvd., #220  
Indianapolis, IN 46250**Line **2.16**



Debtor	Case number (if known)
<b>Coat Check Coffee LLC</b> Name	
<b>Corporate Creations Newtwork, Inc.</b> 8520 Allison Pointe Blvd., Suite 220 Indianapolis, IN 46250	Line <u>2.13</u>
<b>Corporation SService Company</b> 801 Adlai Stevenson Springfield, IL 62702	Line <u>2.3</u>
<b>CT CORPORATION</b> 334 North Senate Avenue Indianapolis, IN 46204	Line <u>2.4</u>
<b>CT Corporation System</b> 334 North Sentate Avenue Indianapolis, IN 46204	Line <u>2.12</u>
<b>CT Corporation System</b> 334 North Senate Avenue Indianapolis, IN 46204	Line <u>2.9</u>
<b>CT Corporation System</b> 334 North Senate Avenue Indianapolis, IN 46204	Line <u>2.10</u>
<b>Greenburg, Grant and Richards</b> 5858 Westheimer Rd. Suite 500 Houston, TX 77057	Line <u>2.6</u>
<b>Indy Chamber</b>	Line <u>2.11</u>
<b>WebBank, its successors and assignees</b> 215 South Bank Street, Suite 1000 Salt Lake City, UT 84111	Line <u>2.16</u>
<b>Weltmann, Weinberg, Reis Co. LPA</b> PO Box 93596 Cleveland, OH 44101	Line <u>2.7</u>

Indiana Secretary of State



FILE #: 202401293153707  
DATE FILED: 29 Jan 2024 02:25 PM

## UCC FINANCING STATEMENT

## DEBTOR INFORMATION

ORGANIZATION'S NAME:	Strange Bird LLC		
MAILING ADDRESS:	128 South Audubon Road		
CITY:	Indianapolis	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	Coat Check Coffee LLC		
MAILING ADDRESS:	328 N Layman Ave		
CITY:	Indianapolis	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
INDIVIDUAL'S SURNAME:	Warner	FIRST PERSONAL NAME:	Neal
ADDITIONAL NAME(S)/INITIAL(S):		SUFFIX:	
MAILING ADDRESS:	325 North Campbell		
CITY:	Indianapolis	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
INDIVIDUAL'S SURNAME:	Warner	FIRST PERSONAL NAME:	Paul
ADDITIONAL NAME(S)/INITIAL(S):		SUFFIX:	
MAILING ADDRESS:	328 North Layman Avenue		
CITY:	Indianapolis	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA

## SECURED PARTY INFORMATION

ORGANIZATION'S NAME:	Clearview Funding Solutions, LLC		
MAILING ADDRESS:	576 Broadhollow Rd		
CITY:	Melville	POSTAL CODE:	11747
STATE:	NY	COUNTRY:	USA

## COLLATERAL INFORMATION

## THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL:

All Assets now owned or hereafter acquired and wherever located, including but not limited to, the following subcategories of assets: a. Accounts, including but not limited to, credit card receivables; b. Chattel Paper; c. Inventory; d. Equipment; e. Instruments, including but not limited to, Promissory Notes; f. Investment Property; g. Documents; h. Deposit Accounts; i. Letter of Credits Rights; j. General Intangibles; k. Supporting Obligations; and l. Proceeds and Products of the foregoing. NOTICE PURSUANT TO AN AGREEMENT BETWEEN DEBTOR AND SECURED PARTY, DEBTOR HAS AGREED NOT TO FURTHER ENCUMBER THE COLLATERAL DESCRIBED HEREIN, THE FURTHER ENCUMBERING OF WHICH MAY CONSTITUTE THE TORTIOUS INTERFERENCE WITH THE SECURED PARTY'S RIGHT BY SUCH ENCUMBRANCER IN THE EVENT THAT ANY ENTITY IS GRANTED A SECURITY INTEREST IN DEBTOR'S ACCOUNTS, CHATTEL PAPER OR GENERAL INTANGIBLES CONTRARY TO THE ABOVE, THE SECURED PARTY ASSERTS A CLAIM TO ANY PROCEEDS THEREOF RECEIVED BY SUCH ENTITY.

FILE #: 202401293153707  
DATE FILED: 29 Jan 2024 02:25 PM

COLLATERAL IS:

- ☐ HELD IN TRUST
- ☐ BEING ADMINISTERED BY DECEDENT'S REPRESENTATIVE

FILING TYPE

- ☐ PUBLIC FINANCE TRANSACTION
- ☐ A DEBTOR IS A TRANSMITTING UTILITY
- ☐ MANUFACTURED-HOME TRANSACTION
- ☐ AGRICULTURAL LIEN
- ☐ NON-UCC FILING

ALTERNATIVE DESIGNATION (IF APPLICABLE)

- ☐ LESSEE/LESSOR
- ☐ CONSIGNEE/CONSIGNOR
- ☐ SELLER/BUYER
- ☐ BAILEE/BAILOR
- ☐ LICENSEE/LICENSOR

OPTIONAL FILER REFERENCE DATA

2747 93817

MISCELLANEOUS

# UCC FINANCING STATEMENT

**NAME OF CONTACT AT FILER**

CORPORATION SERVICE COMPANY

Indiana Secretary of State

201900006215248

Jul 22 2019 3:26PM

**EMAIL ADDRESS**

FILINGDEPT@CSCINFO.COM

**DEBTOR'S EXACT FULL LEGAL NAME****ORGANIZATION'S NAME**

COAT CHECK COFFEE LLC

**MAILING ADDRESS**

328 N LAYMAN AVE

**CITY**

INDIANAPOLIS

**STATE**

IN

**POSTAL CODE**

46219

**COUNTRY**

USA

**SECURED PARTY'S NAME****ORGANIZATION'S NAME**

CORPORATION SERVICE COMPANY, AS REPRESENTATIVE

**MAILING ADDRESS**

801 ADLAI STEVENSON

UCCSPREP@CSCINFO.COM

**CITY**

SPRINGFIELD

**STATE**

IL

**POSTAL CODE**

62706

**COUNTRY**

USA

**ALTERNATIVE DESIGNATION**☒ LESSEE/LESSOR**THIS FINANCING STATEMENT covers the following collateral:**

ALL EQUIPMENT, GENERAL INTANGIBLES AND ALL MODIFICATIONS AND ATTACHMENTS THERETO AND REPLACEMENTS THEREFORE NOW AND HEREAFTER COVERED BY THE EQUIPMENT LEASE AGREEMENT DATED AS OF 07/15/2019 BETWEEN ALLIANCE FUNDING GROUP AS LESSOR AND COAT CHECK COFFEE LLC AS LESSEE AND ALL ADDITIONAL COMMITMENTS RELATED THERETO.

Indiana Secretary of State



FILE #: 202009292686512  
IFS #: 20190826004770  
DATE FILED: 29 Sep 2020 01:54 PM

## UCC FINANCING STATEMENT AMENDMENT

### TERMINATION

INITIAL FINANCING STATEMENT FILE NUMBER: 20190826004770

TERMINATION Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement.

### NAME OF PARTY AUTHORIZING THIS AMENDMENT

Authorized by Named Secured Party:  
CORPORATION SERVICE COMPANY, AS REPRESENTATIVE

### OPTIONAL FILER REFERENCE DATA

1995 72593

### MISCELLANEOUS

Indiana Secretary of State



FILE #: 202312113136593  
DATE FILED: 11 Dec 2023 09:28 AM

## UCC FINANCING STATEMENT

## DEBTOR INFORMATION

ORGANIZATION'S NAME:	STRANGE BIRD LLC		
MAILING ADDRESS:	475 S RITTER AVE		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
INDIVIDUAL'S SURNAME:	WARNER	FIRST PERSONAL NAME:	NEAL
ADDITIONAL NAME(S)/INITIAL(S):		SUFFIX:	
MAILING ADDRESS:	325 CAMPBELL AVE		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
INDIVIDUAL'S SURNAME:	WARNER	FIRST PERSONAL NAME:	PAUL
ADDITIONAL NAME(S)/INITIAL(S):		SUFFIX:	
MAILING ADDRESS:	401 EAST MICHIGAN STREET		
CITY:	INDIANAPOLIS	POSTAL CODE:	46204
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	COAT CHECK COFFEE LLC		
MAILING ADDRESS:	328 N LAYMAN AVE		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA

## SECURED PARTY INFORMATION

ORGANIZATION'S NAME:	CORPORATION SERVICE COMPANY, AS REPRESENTATIVE		
MAILING ADDRESS:	P.O. BOX 2576 uccsprep@cscinfo.com		
CITY:	SPRINGFIELD	POSTAL CODE:	62708
STATE:	IL	COUNTRY:	USA

## COLLATERAL INFORMATION

## THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL:

Receivables - All assets now owned or hereafter acquired and wherever located, including but not limited to, the following subcategories of assets: a. Accounts, including but not limited to, credit card receivables; b. Chattel Paper; c. Inventory; d. Equipment; e. Instruments, including but not limited to, Promissory Notes; f. Investment Property; g. Documents; h. Deposit Accounts; i. Letter of Credit Rights; j. General Intangibles; k. Supporting Obligations; and l. Proceeds and Products of the foregoing. NOTICE PURSUANT TO AN AGREEMENT BETWEEN DEBTOR AND SECURED PARTY, DEBTOR HAS AGREED NOT TO FURTHER ENCUMBER THE COLLATERAL DESCRIBED HEREIN. THE FURTHER ENCUMBERING OF WHICH MAY CONSTITUTE THE TORTIOUS INTERFERENCE WITH THE SECURED PARTY'S RIGHT BY SUCH ENCUMBRANCES IN THE EVENT THAT ANY ENTITY IS GRANTED A SECURITY INTEREST IN DEBTOR'S ACCOUNTS, CHATTEL PAPER OR GENERAL INTANGIBLES CONTRARY TO THE ABOVE, THE SECURED PARTY ASSERTS A CLAIM TO ANY PROCEEDS THEREOF RECEIVED BY SUCH ENTITY"

FILE #: 202312113136593  
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COLLATERAL IS:

- ☐ HELD IN TRUST
- ☐ BEING ADMINISTERED BY DECEDENT'S REPRESENTATIVE

FILING TYPE

- ☐ PUBLIC FINANCE TRANSACTION
- ☐ A DEBTOR IS A TRANSMITTING UTILITY
- ☐ MANUFACTURED-HOME TRANSACTION
- ☐ AGRICULTURAL LIEN
- ☐ NON-UCC FILING

ALTERNATIVE DESIGNATION (IF APPLICABLE)

- ☐ LESSEE/LESSOR
- ☐ CONSIGNEE/CONSIGNOR
- ☒ SELLER/BUYER
- ☐ BAILEE/BAILOR
- ☐ LICENSEE/LICENSOR

OPTIONAL FILER REFERENCE DATA

2710 28555

MISCELLANEOUS

Indiana Secretary of State



FILE #: 202401033144812  
DATE FILED: 03 Jan 2024 07:16 PM

## UCC FINANCING STATEMENT

## DEBTOR INFORMATION

ORGANIZATION'S NAME:	PROVIDER COFFEE LLC		
MAILING ADDRESS:	1101 E 16TH ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46202
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	PROVIDER COFFEE & COCKTAIL LOUNGE		
MAILING ADDRESS:	1101 E 16TH ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46202
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	RESPONDER LLC		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CHALET		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CHALET COFFEE		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	COAT CHECK COFFEE LLC		
MAILING ADDRESS:	915 N RITTER AVE		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	COAT CHECK COFFEE		
MAILING ADDRESS:	915 N RITTER AVE		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CCC BAKING LLC		
MAILING ADDRESS:	5524 E MICHIGAN ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	LANDLOCKED BAKING COMPANY		
MAILING ADDRESS:	5524 E MICHIGAN ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA



FILE #: 202401033144812  
DATE FILED: 03 Jan 2024 07:16 PM

ORGANIZATION'S NAME: STRANGE BIRD LLC  
MAILING ADDRESS: 128 S AUDUBON RD  
CITY: INDIANAPOLIS POSTAL CODE: 46219  
STATE: IN COUNTRY: USA  
ORGANIZATION'S NAME: STRANGE BIRD  
MAILING ADDRESS: 128 S AUDUBON RD  
CITY: INDIANAPOLIS POSTAL CODE: 46219  
STATE: IN COUNTRY: USA

#### SECURED PARTY INFORMATION

ORGANIZATION'S NAME: CORPORATION SERVICE COMPANY, AS REPRESENTATIVE  
MAILING ADDRESS: P.O. BOX 2576, UCCSPREP@CSCINFO.COM  
CITY: SPRINGFIELD POSTAL CODE: 62708  
STATE: IL COUNTRY: USA

#### COLLATERAL INFORMATION

##### THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL:

All accounts, including without limitation, all deposit accounts, accounts-receivable, and other receivables, chattel paper, documents, equipment, general intangibles, instruments, and inventory, as those terms are defined by Article 9 of the Uniform Commercial Code (the "UCC"), now or hereafter owned or acquired by Seller; and all Seller's proceeds, as such term is defined by Article 9 of the UCC. NOTICE PURSUANT TO AN AGREEMENT BETWEEN DEBTOR AND SECURED PARTY, DEBTOR HAS AGREED NOT TO FURTHER ENCUMBER THE COLLATERAL DESCRIBED HEREIN, THE FURTHER ENCUMBERING OF WHICH MAY CONSTITUTE THE TORTIOUS INTERFERENCE WITH THE SECURED PARTY'S RIGHT BY SUCH ENCUMBRANCER IN THE EVENT THAT ANY ENTITY IS GRANTED A SECURITY INTEREST IN DEBTOR'S ACCOUNTS, CHATTEL PAPER OR GENERAL INTANGIBLES CONTRARY TO THE ABOVE, THE SECURED PARTY ASSERTS A CLAIM TO ANY PROCEEDS THEREOF RECEIVED BY SUCH ENTITY.

FILE #: 202401033144812  
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COLLATERAL IS:

- ☐ HELD IN TRUST
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FILING TYPE

- ☐ PUBLIC FINANCE TRANSACTION
- ☐ A DEBTOR IS A TRANSMITTING UTILITY
- ☐ MANUFACTURED-HOME TRANSACTION
- ☐ AGRICULTURAL LIEN
- ☐ NON-UCC FILING

ALTERNATIVE DESIGNATION (IF APPLICABLE)

- ☐ LESSEE/LESSOR
- ☐ CONSIGNEE/CONSIGNOR
- ☐ SELLER/BUYER
- ☐ BAILEE/BAILOR
- ☐ LICENSEE/LICENSOR

OPTIONAL FILER REFERENCE DATA

Optional Filer Reference 2726 64953

MISCELLANEOUS

Indiana Secretary of State



FILE #: 202401033144812  
DATE FILED: 03 Jan 2024 07:16 PM

## UCC FINANCING STATEMENT

## DEBTOR INFORMATION

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MAILING ADDRESS:	1101 E 16TH ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46202
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	PROVIDER COFFEE & COCKTAIL LOUNGE		
MAILING ADDRESS:	1101 E 16TH ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46202
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	RESPONDER LLC		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CHALET		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CHALET COFFEE		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	COAT CHECK COFFEE LLC		
MAILING ADDRESS:	915 N RITTER AVE		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	COAT CHECK COFFEE		
MAILING ADDRESS:	915 N RITTER AVE		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CCC BAKING LLC		
MAILING ADDRESS:	5524 E MICHIGAN ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	LANDLOCKED BAKING COMPANY		
MAILING ADDRESS:	5524 E MICHIGAN ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA

FILE #: 202401033144812  
DATE FILED: 03 Jan 2024 07:16 PM

ORGANIZATION'S NAME: STRANGE BIRD LLC  
MAILING ADDRESS: 128 S AUDUBON RD  
CITY: INDIANAPOLIS POSTAL CODE: 46219  
STATE: IN COUNTRY: USA  
ORGANIZATION'S NAME: STRANGE BIRD  
MAILING ADDRESS: 128 S AUDUBON RD  
CITY: INDIANAPOLIS POSTAL CODE: 46219  
STATE: IN COUNTRY: USA

#### SECURED PARTY INFORMATION

ORGANIZATION'S NAME: CORPORATION SERVICE COMPANY, AS REPRESENTATIVE  
MAILING ADDRESS: P.O. BOX 2576, UCCSPREP@CSCINFO.COM  
CITY: SPRINGFIELD POSTAL CODE: 62708  
STATE: IL COUNTRY: USA

#### COLLATERAL INFORMATION

##### THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL:

All accounts, including without limitation, all deposit accounts, accounts-receivable, and other receivables, chattel paper, documents, equipment, general intangibles, instruments, and inventory, as those terms are defined by Article 9 of the Uniform Commercial Code (the "UCC"), now or hereafter owned or acquired by Seller; and all Seller's proceeds, as such term is defined by Article 9 of the UCC. NOTICE PURSUANT TO AN AGREEMENT BETWEEN DEBTOR AND SECURED PARTY, DEBTOR HAS AGREED NOT TO FURTHER ENCUMBER THE COLLATERAL DESCRIBED HEREIN, THE FURTHER ENCUMBERING OF WHICH MAY CONSTITUTE THE TORTIOUS INTERFERENCE WITH THE SECURED PARTY'S RIGHT BY SUCH ENCUMBRANCER IN THE EVENT THAT ANY ENTITY IS GRANTED A SECURITY INTEREST IN DEBTOR'S ACCOUNTS, CHATTEL PAPER OR GENERAL INTANGIBLES CONTRARY TO THE ABOVE, THE SECURED PARTY ASSERTS A CLAIM TO ANY PROCEEDS THEREOF RECEIVED BY SUCH ENTITY.

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COLLATERAL IS:

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FILING TYPE

- ☐ PUBLIC FINANCE TRANSACTION
- ☐ A DEBTOR IS A TRANSMITTING UTILITY
- ☐ MANUFACTURED-HOME TRANSACTION
- ☐ AGRICULTURAL LIEN
- ☐ NON-UCC FILING

ALTERNATIVE DESIGNATION (IF APPLICABLE)

- ☐ LESSEE/LESSOR
- ☐ CONSIGNEE/CONSIGNOR
- ☐ SELLER/BUYER
- ☐ BAILEE/BAILOR
- ☐ LICENSEE/LICENSOR

OPTIONAL FILER REFERENCE DATA

Optional Filer Reference 2726 64953

MISCELLANEOUS

Indiana Secretary of State



FILE #: 202004172609442  
DATE FILED: 17 Apr 2020 06:08 PM

## UCC FINANCING STATEMENT

## DEBTOR INFORMATION

ORGANIZATION'S NAME: COAT CHECK COFFEE LLC  
MAILING ADDRESS: 401 E Michigan St  
CITY: Indianapolis POSTAL CODE: 46219  
STATE: IN COUNTRY: United States

## SECURED PARTY INFORMATION

ORGANIZATION'S NAME: NEIGHBORHOOD SELF-EMPLOYMENT INITIATIVE, INC.  
MAILING ADDRESS: 111 Monument Circle, Suite 1950  
CITY: Indianapolis POSTAL CODE: 46204-5142  
STATE: IN COUNTRY: United States

## COLLATERAL INFORMATION

## THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL:

ALL OF DEBTOR'S INTEREST IN PERSONAL PROPERTY OF EVERY KIND AND NATURE, WHEREVER LOCATED, WHETHER NOW OWNED OR HEREAFTER ACQUIRED OR ARISING, INCLUDING ALL GOODS ( INCLUDING INVENTORY, EQUIPMENT AND ANY ACCESSIONS THERETO), FIXTURES, DOCUMENTS, INSTRUMENTS ( INCLUDING PROMISSORY NOTES), ACCOUNTS (INCLUDING HEALTH CARE INSURANCE RECEIVABLES), SECURITIES AND ALL OTHER INVESTMENT PROPERTY, SUPPORTING OBLIGATIONS, CHATTEL PAPER ( WHETHER TANGIBLE OR ELECTRONIC), COMMERCIAL TORT CLAIMS, DEPOSIT ACCOUNTS, LETTER OF CREDIT RIGHTS (WHETHER OR NOT THE LETTER OF CREDIT IS EVIDENCED BY A WRITING), AND ALL GENERAL INTANGIBLES (INCLUDING, WITHOUT LIMITATION, ALL PAYMENT INTANGIBLES, PATENTS, PATENT APPLICATIONS, TRADEMARKS, TRADEMARK APPLICATIONS, TRADE NAMES, TRADE SECRETS, COPYRIGHTS, COPYRIGHT APPLICATIONS, SOFTWARE, SERVICE MARKS, GOODWILL, LICENSES, PERMITS AND AGREEMENTS OF EVERY KIND UTILIZED BY DEBTOR IN ITS BUSINESS), ALL RECORDS OF ANY KIND RELATING TO THE FOREGOING, TOGETHER WITH ALL CASH PROCEEDS, NON-CASH PROCEEDS AND PRODUCTS THEREOF, ADDITIONS AND ACCESSIONS THERETO, REPLACEMENTS AND SUBSTITUTIONS THEREFORE. THE DEBTOR FURTHER ACKNOWLEDGES AND AGREES THAT THIS FINANCING STATEMENT COVERS, AND IS INTENDED TO COVER, ALL ASSETS OF THE DEBTOR.

FILE #: 202004172609442  
DATE FILED: 17 Apr 2020 06:08 PM

COLLATERAL IS:

- ☐ HELD IN TRUST
- ☐ BEING ADMINISTERED BY DECEDENT'S REPRESENTATIVE

FILING TYPE

- ☐ PUBLIC FINANCE TRANSACTION
- ☐ A DEBTOR IS A TRANSMITTING UTILITY
- ☐ MANUFACTURED-HOME TRANSACTION
- ☐ AGRICULTURAL LIEN
- ☐ NON-UCC FILING

ALTERNATIVE DESIGNATION (IF APPLICABLE)

- ☐ LESSOR
- ☐ CONSIGNEE/CONSIGNOR
- ☐ SELLER/BUYER
- ☐ BAILEE/BAILOR
- ☐ LICENSEE/LICENSOR

OPTIONAL FILER REFERENCE DATA

RR-COI067

MISCELLANEOUS

Indiana Secretary of State



FILE #: 202006182638490  
DATE FILED: 18 Jun 2020 10:57 PM

## UCC FINANCING STATEMENT

### DEBTOR INFORMATION

ORGANIZATION'S NAME: Coat Check Coffee LLC  
MAILING ADDRESS: 328 N Layman Ave  
CITY: Indianapolis POSTAL CODE: 46219  
STATE: IN COUNTRY: USA

### SECURED PARTY INFORMATION

ORGANIZATION'S NAME: U.S. Small Business Administration  
MAILING ADDRESS: 2 North Street, Suite 320  
CITY: Birmingham POSTAL CODE: 35203  
STATE: AL COUNTRY: USA

### COLLATERAL INFORMATION

#### THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL:

All tangible and intangible personal property, including, but not limited to: (a) inventory, (b) equipment, (c) instruments, including promissory notes (d) chattel paper, including tangible chattel paper and electronic chattel paper, (e) documents, (f) letter of credit rights, (g) accounts, including health-care insurance receivables and credit card receivables, (h) deposit accounts, (i) commercial tort claims, (j) general intangibles, including payment intangibles and software and (k) as-extracted collateral as such terms may from time to time be defined in the Uniform Commercial Code. The security interest Borrower grants includes all accessions, attachments, accessories, parts, supplies and replacements for the Collateral, all products, proceeds and collections thereof and all records and data relating thereto. 161038 7909



FILE #: 202006182638490  
DATE FILED: 18 Jun 2020 10:57 PM

COLLATERAL IS:

- ☐ HELD IN TRUST
- ☐ BEING ADMINISTERED BY DECEDENT'S REPRESENTATIVE

FILING TYPE

- ☐ PUBLIC FINANCE TRANSACTION
- ☐ A DEBTOR IS A TRANSMITTING UTILITY
- ☐ MANUFACTURED-HOME TRANSACTION
- ☐ AGRICULTURAL LIEN
- ☐ NON-UCC FILING

ALTERNATIVE DESIGNATION (IF APPLICABLE)

- ☐ LESSEE/LESSOR
- ☐ CONSIGNEE/CONSIGNOR
- ☐ SELLER/BUYER
- ☐ BAILEE/BAILOR
- ☐ LICENSEE/LICENSOR

OPTIONAL FILER REFERENCE DATA

1873 25853

MISCELLANEOUS

Indiana Secretary of State



FILE #:	202110122845870
IFS #:	201600009380201
DATE FILED:	12 Oct 2021 05:14 PM

## UCC FINANCING STATEMENT AMENDMENT

### CONTINUATION

INITIAL FINANCING STATEMENT FILE NUMBER: 201600009380201

CONTINUATION Effectiveness of the Financing Statement identified above with respect to the security interest (s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

### NAME OF PARTY AUTHORIZING THIS AMENDMENT

Authorized by Existing Secured Party:

WAYNE BANK & TRUST COMPANY

### OPTIONAL FILER REFERENCE DATA

65752

### MISCELLANEOUS

Indiana Secretary of State



FILE #: 202405073191141  
DATE FILED: 07 May 2024 05:34 PM

## UCC FINANCING STATEMENT

### DEBTOR INFORMATION

ORGANIZATION'S NAME: Coat Check Coffee LLC  
MAILING ADDRESS: 328 N Layman Ave

CITY: Indianapolis POSTAL CODE: 46219  
STATE: IN COUNTRY: United States

### SECURED PARTY INFORMATION

ORGANIZATION'S NAME: WebBank, its successors and assignees  
MAILING ADDRESS: 215 SOUTH STATE STREET, STE 1000

CITY: Salt Lake City POSTAL CODE: 84111  
STATE: UT COUNTRY: United States

### COLLATERAL INFORMATION

THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL:

All accounts receivable, other rights of payment of Borrower, and payments made to Borrower, however made, including, but not limited to, payments by cash, check, ACH, wire transfer or other electronic transfer, and Payment Card Receipts, in each case, arising out of the sale of goods and services by Borrower, together with all proceeds, including cash proceeds, of such receivables, rights of payment, and payments, now existing or hereafter created.

FILE #:	202405073191141
DATE FILED:	07 May 2024 05:34 PM

COLLATERAL IS:

- ☐ HELD IN TRUST
- ☐ BEING ADMINISTERED BY DECEDENT'S REPRESENTATIVE

FILING TYPE

- ☐ PUBLIC FINANCE TRANSACTION
- ☐ A DEBTOR IS A TRANSMITTING UTILITY
- ☐ MANUFACTURED-HOME TRANSACTION
- ☐ AGRICULTURAL LIEN
- ☐ NON-UCC FILING

ALTERNATIVE DESIGNATION (IF APPLICABLE)

- ☐ LESSEE/LESSOR
- ☐ CONSIGNEE/CONSIGNOR
- ☐ SELLER/BUYER
- ☐ BAILEE/BAILOR
- ☐ LICENSEE/LICENSOR

OPTIONAL FILER REFERENCE DATA

juPDRbPOOk1Kjp6Ofk

MISCELLANEOUS

Indiana Secretary of State



FILE #: 202405013189079  
DATE FILED: 01 May 2024 03:47 PM

## UCC FINANCING STATEMENT

### DEBTOR INFORMATION

ORGANIZATION'S NAME: Coat Check Coffee LLC  
MAILING ADDRESS: 328 N Layman Ave

CITY: Indianapolis POSTAL CODE: 46219  
STATE: IN COUNTRY: United States

### SECURED PARTY INFORMATION

ORGANIZATION'S NAME: WebBank, its successors and assignees  
MAILING ADDRESS: 215 SOUTH STATE STREET, STE 1000

CITY: Salt Lake City POSTAL CODE: 84111  
STATE: UT COUNTRY: United States

### COLLATERAL INFORMATION

THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL:

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FILE #:	202405013189079
DATE FILED:	01 May 2024 03:47 PM

COLLATERAL IS:

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FILING TYPE

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- ☐ AGRICULTURAL LIEN
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ALTERNATIVE DESIGNATION (IF APPLICABLE)

- ☐ LESSEE/LESSOR
- ☐ CONSIGNEE/CONSIGNOR
- ☐ SELLER/BUYER
- ☐ BAILEE/BAILOR
- ☐ LICENSEE/LICENSOR

OPTIONAL FILER REFERENCE DATA

FNTr4sfpl1GVEK0Cld

MISCELLANEOUS

Indiana Secretary of State



FILE #: 202401033144812  
DATE FILED: 03 Jan 2024 07:16 PM

## UCC FINANCING STATEMENT

## DEBTOR INFORMATION

ORGANIZATION'S NAME:	PROVIDER COFFEE LLC		
MAILING ADDRESS:	1101 E 16TH ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46202
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	PROVIDER COFFEE & COCKTAIL LOUNGE		
MAILING ADDRESS:	1101 E 16TH ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46202
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	RESPONDER LLC		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CHALET		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CHALET COFFEE		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	COAT CHECK COFFEE LLC		
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ORGANIZATION'S NAME:	COAT CHECK COFFEE		
MAILING ADDRESS:	915 N RITTER AVE		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CCC BAKING LLC		
MAILING ADDRESS:	5524 E MICHIGAN ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	LANDLOCKED BAKING COMPANY		
MAILING ADDRESS:	5524 E MICHIGAN ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA

FILE #: 202401033144812  
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ORGANIZATION'S NAME: STRANGE BIRD LLC  
MAILING ADDRESS: 128 S AUDUBON RD  
CITY: INDIANAPOLIS POSTAL CODE: 46219  
STATE: IN COUNTRY: USA  
ORGANIZATION'S NAME: STRANGE BIRD  
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#### SECURED PARTY INFORMATION

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COLLATERAL IS:

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FILING TYPE

- ☐ PUBLIC FINANCE TRANSACTION
- ☐ A DEBTOR IS A TRANSMITTING UTILITY
- ☐ MANUFACTURED-HOME TRANSACTION
- ☐ AGRICULTURAL LIEN
- ☐ NON-UCC FILING

ALTERNATIVE DESIGNATION (IF APPLICABLE)

- ☐ LESSEE/LESSOR
- ☐ CONSIGNEE/CONSIGNOR
- ☐ SELLER/BUYER
- ☐ BAILEE/BAILOR
- ☐ LICENSEE/LICENSOR

OPTIONAL FILER REFERENCE DATA

Optional Filer Reference 2726 64953

MISCELLANEOUS

Indiana Secretary of State



FILE #: 202009112678766  
DATE FILED: 11 Sep 2020 10:12 AM

## UCC FINANCING STATEMENT

### DEBTOR INFORMATION

ORGANIZATION'S NAME: Provider Coffee LLC  
MAILING ADDRESS: 1101 E 16th St.  
CITY: Indianapolis POSTAL CODE: 46202  
STATE: IN COUNTRY: USA

### SECURED PARTY INFORMATION

ORGANIZATION'S NAME: U.S. Small Business Administration  
MAILING ADDRESS: 2 North Street, Suite 320  
CITY: Birmingham POSTAL CODE: 35203  
STATE: AL COUNTRY: USA

### COLLATERAL INFORMATION

#### THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL:

All tangible and intangible personal property, including, but not limited to: (a) inventory, (b) equipment, (c) instruments, including promissory notes (d) chattel paper, including tangible chattel paper and electronic chattel paper, (e) documents, (f) letter of credit rights, (g) accounts, including health-care insurance receivables and credit card receivables, (h) deposit accounts, (i) commercial tort claims, (j) general intangibles, including payment intangibles and software and (k) as-extracted collateral as such terms may from time to time be defined in the Uniform Commercial Code. The security interest Borrower grants includes all accessions, attachments, accessories, parts, supplies and replacements for the Collateral, all products, proceeds and collections thereof and all records and data relating thereto. 778769 8210

FILE #: 202009112678766  
DATE FILED: 11 Sep 2020 10:12 AM

COLLATERAL IS:

- ☐ HELD IN TRUST
- ☐ BEING ADMINISTERED BY DECEDENT'S REPRESENTATIVE

FILING TYPE

- ☐ PUBLIC FINANCE TRANSACTION
- ☐ A DEBTOR IS A TRANSMITTING UTILITY
- ☐ MANUFACTURED-HOME TRANSACTION
- ☐ AGRICULTURAL LIEN
- ☐ NON-UCC FILING

ALTERNATIVE DESIGNATION (IF APPLICABLE)

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- ☐ SELLER/BUYER
- ☐ BAILEE/BAILOR
- ☐ LICENSEE/LICENSOR

OPTIONAL FILER REFERENCE DATA

1985 65233

MISCELLANEOUS

Indiana Secretary of State



FILE #:	202311143128054
IFS #:	202306153077487
DATE FILED:	14 Nov 2023 01:07 PM

## UCC FINANCING STATEMENT AMENDMENT

### PARTY INFORMATION CHANGE

INITIAL FINANCING STATEMENT FILE NUMBER: 202306153077487

Type of Change: Secured Party Change

This change affects the name and/or address of the Secured Party of record.

### CURRENT RECORD INFORMATION

ORGANIZATION'S NAME: WebBank

MAILING ADDRESS: 215 South State Street, Suite 1000

CITY: Salt Lake City

STATE: UT

POSTAL CODE:

84111

COUNTRY:

United States

### CHANGED or ADDED INFORMATION

ORGANIZATION'S NAME: WebBank, its successors  
and assignees

MAILING ADDRESS: 215 South State Street, Suite 1000

CITY: Salt Lake City

STATE: UT

POSTAL CODE:

84111

COUNTRY:

United States

### NAME OF PARTY AUTHORIZING THIS AMENDMENT

Authorized by Existing Secured Party:

WebBank

### OPTIONAL FILER REFERENCE DATA

82d5db15-1a84-40a8-9544-268f1accdb7b

### MISCELLANEOUS

Indiana Secretary of State



FILE #: 202401033144812  
DATE FILED: 03 Jan 2024 07:16 PM

## UCC FINANCING STATEMENT

## DEBTOR INFORMATION

ORGANIZATION'S NAME:	PROVIDER COFFEE LLC		
MAILING ADDRESS:	1101 E 16TH ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46202
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	PROVIDER COFFEE & COCKTAIL LOUNGE		
MAILING ADDRESS:	1101 E 16TH ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46202
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	RESPONDER LLC		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CHALET		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CHALET COFFEE		
MAILING ADDRESS:	5555 N ILLINOIS ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46208
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	COAT CHECK COFFEE LLC		
MAILING ADDRESS:	915 N RITTER AVE		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	COAT CHECK COFFEE		
MAILING ADDRESS:	915 N RITTER AVE		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CCC BAKING LLC		
MAILING ADDRESS:	5524 E MICHIGAN ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	LANDLOCKED BAKING COMPANY		
MAILING ADDRESS:	5524 E MICHIGAN ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA

FILE #: 202401033144812  
DATE FILED: 03 Jan 2024 07:16 PM

ORGANIZATION'S NAME: STRANGE BIRD LLC  
MAILING ADDRESS: 128 S AUDUBON RD  
CITY: INDIANAPOLIS POSTAL CODE: 46219  
STATE: IN COUNTRY: USA  
ORGANIZATION'S NAME: STRANGE BIRD  
MAILING ADDRESS: 128 S AUDUBON RD  
CITY: INDIANAPOLIS POSTAL CODE: 46219  
STATE: IN COUNTRY: USA

#### SECURED PARTY INFORMATION

ORGANIZATION'S NAME: CORPORATION SERVICE COMPANY, AS REPRESENTATIVE  
MAILING ADDRESS: P.O. BOX 2576, UCCSPREP@CSCINFO.COM  
CITY: SPRINGFIELD POSTAL CODE: 62708  
STATE: IL COUNTRY: USA

#### COLLATERAL INFORMATION

##### THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL:

All accounts, including without limitation, all deposit accounts, accounts-receivable, and other receivables, chattel paper, documents, equipment, general intangibles, instruments, and inventory, as those terms are defined by Article 9 of the Uniform Commercial Code (the "UCC"), now or hereafter owned or acquired by Seller; and all Seller's proceeds, as such term is defined by Article 9 of the UCC. NOTICE PURSUANT TO AN AGREEMENT BETWEEN DEBTOR AND SECURED PARTY, DEBTOR HAS AGREED NOT TO FURTHER ENCUMBER THE COLLATERAL DESCRIBED HEREIN, THE FURTHER ENCUMBERING OF WHICH MAY CONSTITUTE THE TORTIOUS INTERFERENCE WITH THE SECURED PARTY'S RIGHT BY SUCH ENCUMBRANCER IN THE EVENT THAT ANY ENTITY IS GRANTED A SECURITY INTEREST IN DEBTOR'S ACCOUNTS, CHATTEL PAPER OR GENERAL INTANGIBLES CONTRARY TO THE ABOVE, THE SECURED PARTY ASSERTS A CLAIM TO ANY PROCEEDS THEREOF RECEIVED BY SUCH ENTITY.

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COLLATERAL IS:

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OPTIONAL FILER REFERENCE DATA

Optional Filer Reference 2726 64953

MISCELLANEOUS

Indiana Secretary of State



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## UCC FINANCING STATEMENT

## DEBTOR INFORMATION

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STATE:	IN	COUNTRY:	USA
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ORGANIZATION'S NAME:	COAT CHECK COFFEE		
MAILING ADDRESS:	915 N RITTER AVE		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
STATE:	IN	COUNTRY:	USA
ORGANIZATION'S NAME:	CCC BAKING LLC		
MAILING ADDRESS:	5524 E MICHIGAN ST		
CITY:	INDIANAPOLIS	POSTAL CODE:	46219
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- ☐ BAILEE/BAILOR
- ☐ LICENSEE/LICENSOR

OPTIONAL FILER REFERENCE DATA

Optional Filer Reference 2726 64953

MISCELLANEOUS

**Fill in this information to identify the case:**Debtor name **Coat Check Coffee LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>Indiana Department of Revenue</b> <b>100 North Senate Avenue N-240</b> <b>MS 108</b> <b>Indianapolis, IN 46204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$28,024.40</b>	<b>\$28,024.40</b>
	Date or dates debt was incurred <b>2023</b>	Basis for the claim: <b>Sales Tax- Landlocked</b>		
	Last 4 digits of account number <b>3651</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address <b>Indiana Department of Revenue</b> <b>100 North Senate Avenue N-240</b> <b>MS 108</b> <b>Indianapolis, IN 46204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$40,661.55</b>	<b>\$40,661.55</b>
	Date or dates debt was incurred <b>2023</b>	Basis for the claim: <b>Sales Tax- CCC Cafe LLC</b>		
	Last 4 digits of account number <b>3651</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Coat Check Coffee LLC	Case number (if known)		
	Name			
2.3	Priority creditor's name and mailing address <b>Indiana Department of Revenue</b> <b>100 North Senate Avenue N-240</b> <b>MS 108</b> <b>Indianapolis, IN 46204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$17,083.52</b>	<b>\$17,083.52</b>
	Date or dates debt was incurred <b>2023</b>	Basis for the claim: <b>Sales Tax- Responder</b>		
	Last 4 digits of account number <b>3651</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.4	Priority creditor's name and mailing address <b>Indiana Department of Revenue</b> <b>100 North Senate Avenue N-240</b> <b>MS 108</b> <b>Indianapolis, IN 46204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$31,091.11</b>	<b>\$31,091.11</b>
	Date or dates debt was incurred <b>2023</b>	Basis for the claim: <b>Sales Tax- Provider</b>		
	Last 4 digits of account number <b>3651</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.5	Priority creditor's name and mailing address <b>Indiana Department of Revenue</b> <b>100 North Senate Avenue N-240</b> <b>MS 108</b> <b>Indianapolis, IN 46204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$11,000.00</b>	<b>\$11,000.00</b>
	Date or dates debt was incurred <b>2024</b>	Basis for the claim: <b>Possible withholding tax obligations</b>		
	Last 4 digits of account number <b>3651</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.6	Priority creditor's name and mailing address <b>Indiana Department of Revenue</b> <b>100 North Senate Avenue N-240</b> <b>MS 108</b> <b>Indianapolis, IN 46204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,500.00</b>	<b>\$1,500.00</b>
	Date or dates debt was incurred <b>2022</b>	Basis for the claim: <b>Coat Check Coffee, LLC - late file penalty</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Coat Check Coffee LLC</b> Name	Case number (if known)
2.7	Priority creditor's name and mailing address <b>Internal Revenue Service</b> <b>575 N. Pennsylvania Street</b> <b>Stop SB380</b> <b>Indianapolis, IN 46204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred <b>2022</b>	Basis for the claim: <b>Coat Check Coffee, LLC - late file penalty</b>
	Last 4 digits of account number <b>3651</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.8	Priority creditor's name and mailing address <b>Internal Revenue Service</b> <b>575 N. Pennsylvania Street</b> <b>Stop SB380</b> <b>Indianapolis, IN 46204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred <b>2024</b>	Basis for the claim: <b>Possible withholding tax obligations</b>
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address <b>AADCO Alarms</b> <b>115 N 2nd Ave.</b> <b>PO Box 401</b> <b>Beech Grove, IN 46107</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Landlocked Baking</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$700.00</b>
3.2	Nonpriority creditor's name and mailing address <b>AES Indiana</b> <b>1 Monument Circle</b> <b>Indianapolis, IN 46204</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Electric bll for all accounts on Audubon</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$2,504.26</b>
3.3	Nonpriority creditor's name and mailing address <b>ALSCO</b> <b>711 E Vermont St.</b> <b>Indianapolis, IN 46202</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Uniforms - Cafe</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$3,000.00</b>

Debtor	Coat Check Coffee LLC	Case number (if known)	
	Name		
3.4	<b>Nonpriority creditor's name and mailing address</b> <b>AlSCO Inc. /AlSCO Uniforms</b> <b>711 East Vermont</b> <b>Indianapolis, IN 46202</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>4735</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Coat Check Coffee</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$507.30</b>
3.5	<b>Nonpriority creditor's name and mailing address</b> <b>AlSCO Inc./AlSCO Uniforms</b> <b>711 East Vermont</b> <b>Indianapolis, IN 46202</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>4978</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,274.53</b>
3.6	<b>Nonpriority creditor's name and mailing address</b> <b>American Express</b> <b>PO Box 6031</b> <b>Carol Stream, IL 60197</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>credit card purchases (Lowes Business reward card))</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$18,594.11</b>
3.7	<b>Nonpriority creditor's name and mailing address</b> <b>Anthony Najem</b> <b>7501 N. Illinois St.</b> <b>Indianapolis, IN 46260</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Lease Termination Agreement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,008.00</b>
3.8	<b>Nonpriority creditor's name and mailing address</b> <b>AT&amp;T</b> <b>208 S. Akard Street</b> <b>Dallas, TX 75202</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>7894</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$163.98</b>
3.9	<b>Nonpriority creditor's name and mailing address</b> <b>AT&amp;T</b> <b>208 S. Akard Street</b> <b>Dallas, TX 75202</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>8625</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$207.87</b>
3.10	<b>Nonpriority creditor's name and mailing address</b> <b>Audreyalice Warner</b> <b>328 N. Layman Avenue</b> <b>Indianapolis, IN 46219</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>personal loan - insider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$380,000.00</b>

Debtor	Name	Case number (if known)
3.11	<b>Coat Check Coffee LLC</b> <b>Auto-Chlor</b> <b>6040 W 79th St.</b> <b>Indianapolis, IN 46278</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Provider - Dishwasher lease</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$3,500.00</b>
3.12	<b>Auto-Chlor</b> <b>6040 W 79th St.</b> <b>Indianapolis, IN 46278</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Chalet Dishwasher Lease</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$2,500.00</b>
3.13	<b>Auto-Chlor</b> <b>6040 W 79th St.</b> <b>Indianapolis, IN 46278</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>CCC Dishwasher Lease</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$2,500.00</b>
3.14	<b>Becker Farms</b> <b>7392 N. Wilbur Wright Rd.</b> <b>Mooreland, IN 47360</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>CCC Baking - Trade Debt</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$2,000.00</b>
3.15	<b>BlueCart, Inc.</b> <b>4970 Grazing Hill Road</b> <b>Shingle Springs, CA 95682</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Online Billing Service</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$500.00</b>
3.16	<b>BMI</b> <b>10 Music Square East</b> <b>Nashville, TN 37203</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>5822</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Provider</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$1,113.38</b>
3.17	<b>Capital One</b> <b>PO Box 30285</b> <b>Salt Lake City, UT 84130</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>6294</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>credit card purchases (Small Victories card)</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$12,781.75</b>

Debtor	<b>Coat Check Coffee LLC</b> Name	Case number (if known)
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3.18	<b>Nonpriority creditor's name and mailing address</b> <b>Chase Bank</b> <b>PO Box 6294</b> <b>Carol Stream, IL 60197</b> Date(s) debt was incurred <u>2023</u> Last 4 digits of account number <u>4093</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$5,562.12</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>credit card purchases (Becker Farms and Cintas); CCC Irvington</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.19	<b>Nonpriority creditor's name and mailing address</b> <b>Chase Bank</b> <b>PO Box 6294</b> <b>Carol Stream, IL 60197</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>0083</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$10,639.41</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>bakery credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Chase Bank</b> <b>PO Box 6294</b> <b>Carol Stream, IL 60197</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>3602</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$13,591.15</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>CCC Roasting LLC;</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.21	<b>Nonpriority creditor's name and mailing address</b> <b>Chase Bank</b> <b>PO Box 6294</b> <b>Carol Stream, IL 60197</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>4176</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$5,157.73</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>credit card; Coat Check Coffee - cafe card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.22	<b>Nonpriority creditor's name and mailing address</b> <b>Chase Bank</b> <b>PO Box 6294</b> <b>Carol Stream, IL 60197</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>8761</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$19,590.86</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Provider credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.23	<b>Nonpriority creditor's name and mailing address</b> <b>Chase Bank</b> <b>PO Box 6294</b> <b>Carol Stream, IL 60197</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>8485</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$14,700.95</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>CCC credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Chef's Warehouse Midwest, LLC</b> <b>100 East Ridge Road</b> <b>Ridgefield, CT 06877</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$24,364.51</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>CCC Baking d/b/a Landlocked Baking</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Coat Check Coffee LLC	Case number (if known)
Name		
3.25	<b>Nonpriority creditor's name and mailing address</b> <b>Chef's Warehouse Midwest, LLC</b> <b>100 East Ridge Road</b> <b>Ridgefield, CT 06877</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$1,326.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.26	<b>Nonpriority creditor's name and mailing address</b> <b>Chef's Warehouse Midwest, LLC</b> <b>100 East Ridge Road</b> <b>Ridgefield, CT 06877</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$705.47</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Coat Check Coffee</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	<b>Nonpriority creditor's name and mailing address</b> <b>Chef's Warehouse Midwest, LLC</b> <b>100 East Ridge Road</b> <b>Ridgefield, CT 06877</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$632.07</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Chalet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28	<b>Nonpriority creditor's name and mailing address</b> <b>Cintas</b> <b>6800 Cintas Blvd.</b> <b>PO Box 625737</b> <b>Cincinnati, OH 45262</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>1831</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$150.35</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>CCC Baking LLC d/b/a Landlocked Baking</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29	<b>Nonpriority creditor's name and mailing address</b> <b>Cintas</b> <b>6800 Cintas Blvd.</b> <b>PO Box 625737</b> <b>Cincinnati, OH 45262</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>6187</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$900.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Chalet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30	<b>Nonpriority creditor's name and mailing address</b> <b>Citizens Energy Group</b> <b>2020 North Meridian St</b> <b>Indianapolis, IN 46202</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>0000</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$1,319.62</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>CCC and SVH utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.31	<b>Nonpriority creditor's name and mailing address</b> <b>Credit Key</b> <b>145 S. Fairfax Avenue, Suite 200</b> <b>Los Angeles, CA 90036</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>2355</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$11,132.47</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>SVH credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
<b>Coat Check Coffee LLC</b>	
<b>3.32</b> Nonpriority creditor's name and mailing address <b>De La Finca Coffee Company LLC</b> <b>108 Thomas Mill Rd. Suite 100</b> <b>Holly Springs, NC 27540</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$14,747.35</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>CCC Roasting LLC</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.33</b> Nonpriority creditor's name and mailing address <b>Fire Inspection</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$200.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Chalet</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.34</b> Nonpriority creditor's name and mailing address <b>FNBO</b> <b>PO Box 3128</b> <b>Omaha, NE 68103</b> Date(s) debt was incurred ____ Last 4 digits of account number <u><b>6774</b></u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$10,462.57</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Credit Card - CCC webstraunt</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.35</b> Nonpriority creditor's name and mailing address <b>Gurney J. Bush Inc.</b> <b>PO Box 21398</b> <b>Indianapolis, IN 46221</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$125.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Landlocked Baking</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.36</b> Nonpriority creditor's name and mailing address <b>James D. and Sharon Howell</b> <b>11928 Dalton Road</b> <b>Losantville, IN 47354</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$49,930.39</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Personal loan</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.37</b> Nonpriority creditor's name and mailing address <b>Jim and Melinda Robbins</b> <b>1451 South Longview St.</b> <b>Beavercreek, OH 45432</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$23,500.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>personal loan</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.38</b> Nonpriority creditor's name and mailing address <b>Liberty Mutual</b> <b>PO Box 188025</b> <b>Fairfield, OH 45018</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$350.60</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>CCC Builders LLC</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
<b>Coat Check Coffee LLC</b>	
<b>3.39</b> Nonpriority creditor's name and mailing address <b>Liberty Mutual</b> <b>PO Box 188025</b> <b>Fairfield, OH 45018</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$800.66</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>CCC Baking LLC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.40</b> Nonpriority creditor's name and mailing address <b>Liberty Mutual</b> <b>PO Box 188025</b> <b>Fairfield, OH 45018</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$5,350.95</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Coat Check Coffee LLC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.41</b> Nonpriority creditor's name and mailing address <b>Liberty Mutual</b> <b>PO Box 188025</b> <b>Fairfield, OH 45018</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$824.24</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Responder LLC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.42</b> Nonpriority creditor's name and mailing address <b>Liberty Mutual</b> <b>PO Box 188025</b> <b>Fairfield, OH 45018</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$788.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>CCC Roasting LLC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.43</b> Nonpriority creditor's name and mailing address <b>Marion County Treasurer</b> <b>200 East Washington St. Suite 1001</b> <b>Indianapolis, IN 46204</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$1,392.41</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>CCC LLC - Assessed BPPT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.44</b> Nonpriority creditor's name and mailing address <b>MKR CPAs and Advisors, LLC</b> <b>9957 Crosspoint Blvd.</b> <b>Suite 100</b> <b>Indianapolis, IN 46256</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$8,953.52</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Coat Check Coffee, Provider and Small Victories</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.45</b> Nonpriority creditor's name and mailing address <b>Navitas Credit Corp.</b> <b>203 Fort Wade Road, Suite 300</b> <b>Ponte Vedra, FL 32081</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$2,940.93</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Lease arrearage - Espresso - Mod Bar</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Coat Check Coffee LLC	Case number (if known)	
	Name		
3.46	<b>Nonpriority creditor's name and mailing address</b> <b>Navitas Credit Corp.</b> <b>203 Fort Wade Road, Suite 300</b> <b>Ponte Vedra, FL 32081</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Lease arrearage - Espresso - Eversys</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,200.35</b>
3.47	<b>Nonpriority creditor's name and mailing address</b> <b>Nelson Alarms</b> <b>2602 East 55th St.</b> <b>Indianapolis, IN 46220</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$350.00</b>
3.48	<b>Nonpriority creditor's name and mailing address</b> <b>New Lane Finance</b> <b>123 South Broad St. 17th Floor</b> <b>Philadelphia, PA 19109</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Arrears for lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,204.95</b>
3.49	<b>Nonpriority creditor's name and mailing address</b> <b>Nextiva, Inc.</b> <b>PO Box 207330</b> <b>Dallas, TX 75320</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>1051</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Small Victories</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$279.82</b>
3.50	<b>Nonpriority creditor's name and mailing address</b> <b>North Star Leasing</b> <b>747 Pine St. #201</b> <b>Burlington, VT 05401</b> Date(s) debt was incurred <u>2023</u> Last 4 digits of account number <u>3651</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Machine Rental - Brewing Equipment - Spike Nano</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13,000.00</b>
3.51	<b>Nonpriority creditor's name and mailing address</b> <b>North Star Leasing</b> <b>747 Pine St. #201</b> <b>Burlington, VT 05401</b> Date(s) debt was incurred <u>2023</u> Last 4 digits of account number <u>3651</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Machine Rental - Brewing Equipment - Noodle Maker</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,832.00</b>
3.52	<b>Nonpriority creditor's name and mailing address</b> <b>North Star Leasing</b> <b>747 Pine St. #201</b> <b>Burlington, VT 05401</b> Date(s) debt was incurred <u>2023</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Machine Rental - Proofer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,500.00</b>

Debtor Name	Case number (if known)
<b>Coat Check Coffee LLC</b> 3.53 Nonpriority creditor's name and mailing address <b>Piazza Produce</b> <b>5941 West 82nd St.</b> <b>Indianapolis, IN 46278</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$5,617.35</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Produce - Cafe</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.54 Nonpriority creditor's name and mailing address <b>Piazza Produce</b> <b>5941 West 82nd St.</b> <b>Indianapolis, IN 46278</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$452.27</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Produce - Provider</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.55 Nonpriority creditor's name and mailing address <b>Quench USA, Inc.</b> <b>630 Allendale Rd. Suite 200</b> <b>King of Prussia, PA 19406</b> Date(s) debt was incurred ____ Last 4 digits of account number <u><b>4988</b></u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$1,946.84</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Water Cooler System</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.56 Nonpriority creditor's name and mailing address <b>Quickbooks</b> <b>2700 Coast Avenue</b> <b>Mountain View, CA 94043</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Notice only</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.57 Nonpriority creditor's name and mailing address <b>Ritter Management Group LLC</b> <b>471 S. Ritter Avenue</b> <b>Indianapolis, IN 46219</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$5,700.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>3 months lease arrearage</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58 Nonpriority creditor's name and mailing address <b>Robert Warner</b> <b>6546 Baker Rd.</b> <b>Hagerstown, IN 47346</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$279,000.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>personal loan</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59 Nonpriority creditor's name and mailing address <b>Sesac</b> <b>35 Music Square East</b> <b>Nashville, TN 37203</b> Date(s) debt was incurred ____ Last 4 digits of account number <u><b>9411</b></u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$1,000.88</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Coat Check Coffee LLC	Case number (if known)
Name		
3.60	<b>Nonpriority creditor's name and mailing address</b> <b>Spectrum</b> <b>240 N. Delaware St.</b> <b>Indianapolis, IN 46204</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>2224</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <u>\$464.11</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Utility Arrearage</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.61	<b>Nonpriority creditor's name and mailing address</b> <b>Spectrum</b> <b>240 N. Delaware St.</b> <b>Indianapolis, IN 46204</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>0030</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <u>\$134.89</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>CCC LLC - Utility Arrearage</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.62	<b>Nonpriority creditor's name and mailing address</b> <b>Third Street Ventures, LLC</b> <b>6630 E. 75th Street, Suite 214</b> <b>Indianapolis, IN 46250</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <u>\$60,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	<b>Nonpriority creditor's name and mailing address</b> <b>Waste Management</b> <b>200 S Harding St.</b> <b>Indianapolis, IN 46222</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <u>\$277.08</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Chalet - Utility Arrearage</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	<b>Nonpriority creditor's name and mailing address</b> <b>Waste Management</b> <b>200 S Harding St.</b> <b>Indianapolis, IN 46222</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <u>\$613.57</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Small Victories LLC - Utility Arrearage</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65	<b>Nonpriority creditor's name and mailing address</b> <b>What Chef's Want</b> <b>940 West 5th St.</b> <b>Cincinnati, OH 45203</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <u>\$11,634.65</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>CCC Baking LLC d/b/a Landlocked Baking</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.66	<b>Nonpriority creditor's name and mailing address</b> <b>What Chef's Want</b> <b>940 West 5th St.</b> <b>Cincinnati, OH 45203</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <u>\$7,823.24</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Coat Check Coffee LLC**  
Name

Case number (if known)

3.67 Nonpriority creditor's name and mailing address

**What Chef's Want**  
**940 West 5th St.**  
**Cincinnati, OH 45203**

Date(s) debt was incurred \_

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.***\$134.31**

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim: **Chalet**Is the claim subject to offset? ☒ No ☐ Yes**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Caine &amp; Weiner</b> <b>12005 Ford Rd. Suite 300</b> <b>Dallas, TX 75234</b>	Line <b>3.38</b> <input type="checkbox"/> Not listed. Explain _____	—
4.2	<b>ConServe</b> <b>200 CrossKeys Office Park</b> <b>Fairport, NY 14450</b>	Line <b>2.7</b> <input type="checkbox"/> Not listed. Explain _____	—
4.3	<b>Corporation Service Company</b> <b>PO Box 2576</b> <b>Springfield, IL 62708</b>	Line <b>3.24</b> <input type="checkbox"/> Not listed. Explain _____	—
4.4	<b>Corporation Service Company</b> <b>PO Box 2576</b> <b>Springfield, IL 62708</b>	Line <b>3.25</b> <input type="checkbox"/> Not listed. Explain _____	—
4.5	<b>Corporation Service Company</b> <b>PO Box 2576</b> <b>Springfield, IL 62708</b>	Line <b>3.26</b> <input type="checkbox"/> Not listed. Explain _____	—
4.6	<b>Corporation Service Company</b> <b>PO Box 2576</b> <b>Springfield, IL 62708</b>	Line <b>3.27</b> <input type="checkbox"/> Not listed. Explain _____	—
4.7	<b>CT Corporation System</b> <b>330 N Brand Blvd, Suite 700</b> <b>Glendale, CA 91203</b>	Line <b>3.5</b> <input type="checkbox"/> Not listed. Explain _____	—
4.8	<b>CT Corporation System</b> <b>330 N Brand Blvd, Suite 700</b> <b>Glendale, CA 91203</b>	Line <b>3.4</b> <input type="checkbox"/> Not listed. Explain _____	—
4.9	<b>FNBO</b> <b>1601 Capital Avenue</b> <b>Omaha, NE 68102</b>	Line <b>3.34</b> <input type="checkbox"/> Not listed. Explain _____	—
4.10	<b>Leviton Law Firm LDT</b> <b>One Pierce Place Suite 725W</b> <b>Itasca, IL 60143</b>	Line <b>3.65</b> <input type="checkbox"/> Not listed. Explain _____	—

Debtor	Name	Case number (if known)
	<b>Coat Check Coffee LLC</b>	
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?
4.11	<b>Linebarger Groan Blair &amp; Sampson LLP</b> <b>PO Box 44008</b> <b>Indianapolis, IN 46244</b>	Line <b>3.33</b> <input type="checkbox"/> Not listed. Explain _____
4.12	<b>Northwest Registered Agent LLC</b> <b>5534 Saint Joe Road</b> <b>Fort Wayne, IN 46835</b>	Line <b>3.15</b> <input type="checkbox"/> Not listed. Explain _____
4.13	<b>RMS</b> <b>PO Box 500</b> <b>Fogelsville, PA 18051</b>	Line <b>3.63</b> <input type="checkbox"/> Not listed. Explain _____
4.14	<b>Sequin Asset Solutions LLC</b> <b>1130 Northchase Pkwy. Suite 150</b> <b>Marietta, GA 30067</b>	Line <b>3.60</b> <input type="checkbox"/> Not listed. Explain _____
4.15	<b>United Collections Bureau</b> <b>200 Patrol Rd. Suite 200</b> <b>Jeffersonville, IN 47130</b>	Line <b>2.4</b> <input type="checkbox"/> Not listed. Explain _____

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <b>144,962.42</b>
5b. +	\$ <b>1,068,160.82</b>
5c.	\$ <b>1,213,123.24</b>



**Fill in this information to identify the case:**Debtor name **Coat Check Coffee LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

**Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **Opened Provider - Dishwasher lease**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Auto-Chlor  
6040 W 79th St.  
Indianapolis, IN 46278**2.2. State what the contract or lease is for and the nature of the debtor's interest **Opened Chalet - Dishwasher lease**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Auto-Chlor  
6040 W 79th St.  
Indianapolis, IN 46278**2.3. State what the contract or lease is for and the nature of the debtor's interest **CCC dishwasher lease**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Auto-Chlor  
6040 W 79th St.  
Indianapolis, IN 46278**2.4. State what the contract or lease is for and the nature of the debtor's interest **Equipment Rental - Lease for Espresso Machine Mod Bar**State the term remaining **3 months**

List the contract number of any government contract \_\_\_\_\_

**Navitas Credit Corp.  
203 Fort Wade Road, Suite 300  
Ponte Vedra, FL 32081**

Debtor 1 **Coat Check Coffee LLC**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **Equipment rental - Eversys Espresso Machine**

State the term remaining **10 months**

List the contract number of any government contract \_\_\_\_\_

**Navitas Credit Corp.  
203 Fort Wade Road, Suite 300  
Ponte Vedra, FL 32081**

2.6. State what the contract or lease is for and the nature of the debtor's interest **Lease**

State the term remaining **44 months**

List the contract number of any government contract \_\_\_\_\_

**New Lane Finance  
123 South Broad St. 17th Floor  
Philadelphia, PA 19109**

2.7. State what the contract or lease is for and the nature of the debtor's interest **Equipment Rental - Proofer - CCC Baking LLC**

State the term remaining **18 months**

List the contract number of any government contract \_\_\_\_\_

**North Star Leasing  
747 Pine St. #201  
Burlington, VT 05401**

2.8. State what the contract or lease is for and the nature of the debtor's interest **Opened 2023 Machine Rental - Noodle Maker**

State the term remaining **18 months**

List the contract number of any government contract \_\_\_\_\_

**North Star Leasing  
747 Pine St. #201  
Burlington, VT 05401**

2.9. State what the contract or lease is for and the nature of the debtor's interest **Brewing Equipment - CCC Baking**

State the term remaining **20 months**

List the contract number of any government contract \_\_\_\_\_

**North Star Leasing  
747 Pine St. #201  
Burlington, VT 05401**

Debtor 1 **Coat Check Coffee LLC**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.10. State what the contract or lease is for and the nature of the debtor's interest

**Leased premises: 120 South Audubon Road, Indianapolis, Indiana; 5 year lease beginning June 1, 2020; base rent \$120,000.00 per year. CCC**

State the term remaining

**12 months**

List the contract number of any government contract

**Pillow Rock Property, LLC  
8421 East 450  
Carthage, IN 46115**

2.11. State what the contract or lease is for and the nature of the debtor's interest

**Lease 479 S. Ritter Avenue to be used for the only the following - office use, file storage, internal company staff meetings, equipment storage, tool storage, maintenance and repair of restaurant equipment and fixtures, coffee roasting. Lease dated September 15, 2021 to September 15, 2024. Base rent is \$1,900.00.**

State the term remaining

**3 month**

List the contract number of any government contract

**Ritter Management Group LLC  
471 S. Ritter Avenue  
Indianapolis, IN 46219**

2.12. State what the contract or lease is for and the nature of the debtor's interest

**Lease expires December 31, 2026; rent is \$1,400.00 per month.**

State the term remaining

List the contract number of any government contract

**The Athenaeum Foundation, Inc.  
Craig Mince, President  
401 E. Michigan Street  
Indianapolis, IN 46204**

2.13. State what the contract or lease is for and the nature of the debtor's interest

**Management Agreement for Coat Check Coffee establishment  
1 month**

State the term remaining

List the contract number of any government contract

**The Athenaeum Foundation, Inc.  
401 E. Michigan Street  
Indianapolis, IN 46204**

Debtor 1 **Coat Check Coffee LLC**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.14. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

**Management agreement for operation of Provider establishment.  
1 month****Tinker T.A.B. L.L.C.  
1101 East 16th Floor 2  
Indianapolis, IN 46202**

2.15. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

**1101 East 16th Street;  
September 1, 2023 through August 31, 2028; Monthly rent \$2,437.39. Tinker TWG, LLC, as successor in interest to Hotel Alpha Tango, LLC (lease dated September 12, 2017)****51 months****Tinker TWG, LLC  
10 S. New New Jersey, Suite 310  
Indianapolis, IN 46204**

## Fill in this information to identify the case:

Debtor name **Coat Check Coffee LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

- |       |                    |  |  |   |
|-------|--------------------|--|--|---|
| 2.1   | <b>Neal Warner</b> | <b>325 Campbell Avenue<br/>Indianapolis, IN 46219<br/>Unlimited personal guaranty</b>  | <b>Neighborhood<br/>Self-Employment<br/>Initiative</b> | <input checked="" type="checkbox"/> D <b>2.11</b><br><input type="checkbox"/> E/F _____<br><input type="checkbox"/> G _____ |
| <hr/> |                    |  |  |   |
| 2.2   | <b>Neal Warner</b> | <b>325 Campbell Avenue<br/>Indianapolis, IN 46219</b>                                  | <b>James D. and Sharon<br/>Howell</b>                  | <input type="checkbox"/> D _____<br><input checked="" type="checkbox"/> E/F <b>3.36</b><br><input type="checkbox"/> G _____ |
| <hr/> |                    |  |  |   |
| 2.3   | <b>Paul Warner</b> | <b>328 N. Layman Avenue<br/>Indianapolis, IN 46219<br/>Personal Guarantor</b>          | <b>Intuit Financing Inc.</b>                           | <input checked="" type="checkbox"/> D <b>2.6</b><br><input type="checkbox"/> E/F _____<br><input type="checkbox"/> G _____  |
| <hr/> |                    |  |  |   |
| 2.4   | <b>Paul Warner</b> | <b>328 N. Layman Avenue<br/>Indianapolis, IN 46219<br/>Unlimited personal guaranty</b> | <b>Neighborhood<br/>Self-Employment<br/>Initiative</b> | <input checked="" type="checkbox"/> D <b>2.11</b><br><input type="checkbox"/> E/F _____<br><input type="checkbox"/> G _____ |
| <hr/> |                    |  |  |   |
| 2.5   | <b>Paul Warner</b> | <b>328 N. Layman Avenue<br/>Indianapolis, IN 46219</b>                                 | <b>James D. and Sharon<br/>Howell</b>                  | <input type="checkbox"/> D _____<br><input checked="" type="checkbox"/> E/F <b>3.36</b><br><input type="checkbox"/> G _____ |

Debtor **Coat Check Coffee LLC**

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors****Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.**

Column 1: Codebtor

Column 2: Creditor

2.6	<b>Paul Warner</b>	<b>328 N. Layman Avenue Indianapolis, IN 46219</b>	<b>Athenaeum Foundation, Inc.</b>	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <b>2.12</b>
-----	--------------------	--	---------------------------------------	---

2.7	<b>Paul Warner</b>	<b>328 N. Layman Avenue Indianapolis, IN 46219</b>	<b>Pillow Rock Property, LLC</b>	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <b>2.10</b>
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**Fill in this information to identify the case:**Debtor name Coat Check Coffee LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****For prior year:**  
From 1/01/2023 to 12/31/2023**Sources of revenue**  
Check all that apply☒ Operating a business☐ Other \_\_\_\_\_**Gross revenue**  
(before deductions and exclusions)\$-128,567.82**For year before that:**  
From 1/01/2022 to 12/31/2022☒ Operating a business☐ Other \_\_\_\_\_\$-196,623.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**  
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**  
*Check all that apply*3.1. **SEE ATTACHED****\$0.00**☐ Secured debt  
☐ Unsecured loan repayments  
☐ Suppliers or vendors  
☐ Services  
☐ Other \_\_\_\_\_

Debtor **Coat Check Coffee LLC**

Case number (if known)

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
--	-------	-----------------------	---------------------------------

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
-----------------------------	--------------------------	------	-------------------

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
---------------------------	----------------	------------------------------------	----------------

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None
**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**
☐ None



Debtor **Coat Check Coffee LLC**

Case number (if known) \_\_\_\_\_

**Description of the property lost and how the loss occurred****Amount of payments received for the loss**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

**Dates of loss****Value of property lost****Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.
**Who was paid or who received the transfer?**  
**Address**
**If not money, describe any property transferred****Dates****Total amount or value**
 11.1. **Kroger, Gardis & Regas, LLP**  
**111 Monument Circle**  
**Suite 900**  
**Indianapolis, IN 46204**
**Attorney Fees****\$35,000.00**
**Email or website address**  
**jmizzell@kgirlaw.com**
**Who made the payment, if not debtor?**  
**See Application to Employ**
**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.**Name of trust or device****Describe any property transferred****Dates transfers were made****Total amount or value****13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.
**Who received transfer?**  
**Address**
**Description of property transferred or payments received or debts paid in exchange****Date transfer was made****Total amount or value**
 13.1 **Carmax**  
**9750 Gray Rd.**  
**Indianapolis, IN 46280**
**Dodge Promaster City****9/2023****\$6,500.00**
**Relationship to debtor**  
**N/A**

 13.2 **Third Party Buyer**
**Dodge Sprinter****1/2024****\$2,000.00**
**Relationship to debtor**  
**N/A**

Debtor **Coat Check Coffee LLC**

Case number (if known) \_\_\_\_\_

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address

Dates of occupancy  
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☐ No. Go to Part 9.☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services  
the debtor providesIf debtor provides meals  
and housing, number of  
patients in debtor's care**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**☐ No.☐ Yes. State the nature of the information collected and retained.**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☐ No. Go to Part 10.☐ Yes. Does the debtor serve as plan administrator?**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ NoneFinancial Institution name and  
AddressLast 4 digits of  
account numberType of account or  
instrumentDate account was  
closed, sold,  
moved, or  
transferredLast balance  
before closing or  
transfer18.1. JPMorgan Chase Bank  
PO Box 182051  
Columbus, OH 43218

XXXX-2687

- ☒ Checking
- ☐ Savings
- ☐ Money Market
- ☐ Brokerage
- ☐ Other \_\_\_

\$0.00

18.2. JPMorgan Chase Bank  
PO Box 182051  
Columbus, OH 43218

XXXX-7665

- ☒ Checking
- ☐ Savings
- ☐ Money Market
- ☐ Brokerage
- ☐ Other \_\_\_

\$0.00

Debtor **Coat Check Coffee LLC**

Case number (if known) \_\_\_\_\_

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.3.	JPMorgan Chase Bank PO Box 182051 Columbus, OH 43218	XXXX-8930	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__		\$0.00
18.4.	JPMorgan Chase Bank PO Box 182051 Columbus, OH 43218	XXXX-2991	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__		\$0.00
18.5.	JPMorgan Chase Bank PO Box 182051 Columbus, OH 43218	XXXX-0999	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__		\$0.00
18.6.	JPMorgan Chase Bank PO Box 182051 Columbus, OH 43218	XXXX-1523	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	July 2023	\$0.00
18.7.	JPMorgan Chase Bank PO Box 182051 Columbus, OH 43218	XXXX-0658	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	Jul 2023	\$0.00
18.8.	JPMorgan Chase Bank PO Box 182015 Columbus, OH 43218	XXXX-0936	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	July 2023	\$0.00
18.9.	JPMorgan Chase Bank PO Box 182051 Columbus, OH 43218	XXXX-6260	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	November 2023	\$0.00
18.10	JPMorgan Chase Bank PO Box 182051 Columbus, OH 43218	XXXX-7032	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	May 2024	\$0.00

Debtor **Coat Check Coffee LLC**

Case number (if known) \_\_\_\_\_

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.11 <b>Huntington Bank</b> 45 N. Pennsylvania St. Indianapolis, IN 46204	XXXX-0267	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	<b>December 2023</b>	<b>\$0.00</b>

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
---	--	-----------------------------	----------------------------

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
<b>Ritter Management Group LLC</b> 471 S. Ritter Avenue Indianapolis, IN 46219	<b>Neal Warner</b> 325 Campbell Avenue Indianapolis, IN 46219  <b>Paul Warner</b> 328 N. Layman Avenue Indianapolis, Indiana 46219	<b>Office use, file storage, internal staff meetings, equipment storage, tool storage, maintenance and repair of restaurant equipment and fixtures, roasting coffee.</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>Storage of America</b> 7339 East Washington St. Indianapolis, IN 46219	<b>Neal Warner</b> 325 Campbell Avenue Indianapolis, IN 46219  <b>Paul Warner</b> 328 N. Layman Avenue Indianapolis, IN 46219	<b>Office use, file storage, internal staff meetings, equipment storage, tool storage, maintenance and repair of restaurant equipment and fixtures, roasting coffee. - Multiple Units</b>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Debtor **Coat Check Coffee LLC**

Case number (if known)

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☐ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☐ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☐ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**Part 13: Details About the Debtor's Business or Connections to Any Business**

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. CCC Baking LLC d/b/a Landlocked Baking		<b>Dates business existed</b> <b>EIN:</b> 84-3445702 <b>From-To</b>
25.2. Responder LLC		<b>EIN:</b> 84-3473831 <b>From-To</b>
25.3. Provider Coffee LLC		<b>EIN:</b> 84-4286146 <b>From-To</b>
25.4. Small Victories Hospitality LLC		<b>EIN:</b> 85-4102355 <b>From-To</b>
25.5. CCC Builders LLC		<b>EIN:</b> 84-3498571 <b>From-To</b>

Debtor **Coat Check Coffee LLC**

Case number (if known) \_\_\_\_\_

**Business name address****Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

**Dates business existed**25.6. **CCC Cafe LLC****EIN: 84-3498676****From-To**25.7. **CCC Irvington LLC****EIN: 84-3535196****From-To**25.8. **CCC Park West****EIN: 84-3535359****From-To**25.9. **CCC Roasting LLC****EIN: 84-3446122****From-To**25.10 **Strange Bird LLC****EIN: 84-3473651****From-To****26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None**Name and address****Date of service****From-To**26a.1. **MKR CPAs and Advisors, LLC  
9957 Crosspoint Blvd.  
Suite 100  
Indianapolis, IN 46256****2022-present**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None**Name and address****If any books of account and records are  
unavailable, explain why**26c.1. **Brian Willsey****Finance Manager**26c.2. **Decimal.com****Bookkeeping service**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

Debtor **Coat Check Coffee LLC**

Case number (if known) \_\_\_\_\_

- ☒ No
- ☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Neal Warner	325 Campbell Avenue Indianapolis, IN 46219	Co-Owner	50%
Paul Warner	328 N. Layman Ave. Indianapolis, IN 46219	Co-Owner	50%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
- ☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
- ☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 Neal Warner 325 Campbell Avenue Indianapolis, IN 46219	Compensation		
Relationship to debtor Co-owner			
30.2 Paul Warner 328 N. Layman Avenue Indianapolis, IN 46219	\$24,200.00; Compensation for past 12 months		
Relationship to debtor Co-owner			
30.3 Jim and Melinda Robbins 1451 South Longview St. Beavercreek, OH 45432	\$1500 loan payment		
Relationship to debtor Aunt and Uncle			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

Debtor Coat Check Coffee LLC

Case number (if known) \_\_\_\_\_

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No  
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on August 28, 2024/s/ Neal Warner

Signature of individual signing on behalf of the debtor

Neal Warner

Printed name

Position or relationship to debtor Co-OwnerAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No  
☐ Yes



B2030 (Form 2030) (12/15)

**United States Bankruptcy Court**  
**Southern District of Indiana**

In re **Coat Check Coffee LLC**

Debtor(s)

Case No.

Chapter

**11**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
- |   |    |                    |
|---|----|--------------------|
| For legal services, I have agreed to accept .....           | \$ | <u><b>0.00</b></u> |
| Prior to the filing of this statement I have received ..... | \$ | <u><b>0.00</b></u> |
| Balance Due .....   | \$ | <u><b>0.00</b></u> |
2. \$ **0.00** of the filing fee has been paid.
3. The source of the compensation paid to me was:
- ☐ Debtor      ☒ Other (specify): **See Application to Employ**
4. The source of compensation to be paid to me is:
- ☒ Debtor      ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - d. [Other provisions as needed]
- Filing of lien avoidance and redemption motions; communications with clients, trustee and creditors; review and advise as to reaffirmation agreements.**
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
- Discharge litigations; 707 and 523 actions; exemption issues including, but not limited to, contested motions for the turnover by the trustee; contested lien avoidance motions; contested adversary proceedings for the purpose of stripping liens; contested motions to redeem; attendance at any reaffirmation hearings, if necessary; and representation in any foreclosure action, collection suit, or non-bankruptcy matter.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**August 28, 2024**

Date

**/s/ Jason T. Mizzell****Jason T. Mizzell 30038-53**

Signature of Attorney

**Kroger, Gardis & Regas, LLP****111 Monument Circle****Suite 900****Indianapolis, IN 46204****317-692-9000 Fax: 317-264-6832****jtmizzell@kgirlaw.com**

Name of law firm

**United States Bankruptcy Court  
Southern District of Indiana**

In re **Coat Check Coffee LLC**

Debtor(s)

Case No.  
Chapter**11**

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
<b>Neal Warner</b> <b>5524 E. Michigan Street</b> <b>Indianapolis, IN 46219</b>			<b>50%</b>
<b>Paul Warner</b> <b>328 N. Layman Avenue</b> <b>Indianapolis, IN 46219</b>			<b>50%</b>

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **Co-Owner** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **August 28, 2024**Signature **/s/ Neal Warner**  
**Neal Warner**

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.*

Verification of Creditor List (rev 12/01/18)

UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF INDIANA

In re: \_\_\_\_\_ ) Case No. \_\_\_\_\_  
**Coat Check Coffee LLC** )  
 )  
 ) ☐ Check if this form is submitted with an amended creditor  
 ) list.  
\_\_\_\_\_  
Debtor(s). )

**VERIFICATION OF CREDITOR LIST**

(I/We) declare under penalty of perjury that all entities included or to be included in Schedules D, E/F, G, and H are listed in the creditor list submitted with this verification. This includes all creditors, parties to leases and executory contracts, and codebtors.

(I/We) declare that the names and addresses of the listed entities are true and correct to the best of (my/our) knowledge.

(I/We) understand that (I/we) must file an amended creditor list and pay an amendment fee if there are entities listed on (my/our) schedules that are not included in the creditor list submitted with this verification.

Dated: **August 28, 2024** \_\_\_\_\_

**/s/ Neal Warner** \_\_\_\_\_

**Neal Warner**

Signature of Debtor

\_\_\_\_\_  
Signature of Joint Debtor

**(Note: Certificate of Service not required.)**

AADCO ALARMS  
115 N 2ND AVE.  
PO BOX 401  
BEECH GROVE, IN 46107

AES INDIANA  
1 MONUMENT CIRCLE  
INDIANAPOLIS, IN 46204

ALLIANCE FUNDING  
17542 17TH ST. SUITE 200  
TUSTIN, CA 92780

ALSCO  
711 E VERMONT ST.  
INDIANAPOLIS, IN 46202

ALSCO INC. /ALSCO UNIFORMS  
711 EAST VERMONT  
INDIANAPOLIS, IN 46202

ALSCO INC./ALSCO UNIFORMS  
711 EAST VERMONT  
INDIANAPOLIS, IN 46202

AMERICAN EXPRESS  
PO BOX 6031  
CAROL STREAM, IL 60197

ANTHONY NAJEM  
7501 N. ILLINOIS ST.  
INDIANAPOLIS, IN 46260

AT&T  
208 S. AKARD STREET  
DALLAS, TX 75202

AT&T  
208 S. AKARD STREET  
DALLAS, TX 75202

AUDREYALICE WARNER  
328 N. LAYMAN AVENUE  
INDIANAPOLIS, IN 46219

AUTO-CHLOR  
6040 W 79TH ST.  
INDIANAPOLIS, IN 46278

AUTO-CHLOR  
6040 W 79TH ST.  
INDIANAPOLIS, IN 46278

AUTO-CHLOR  
6040 W 79TH ST.  
INDIANAPOLIS, IN 46278

AUTO-CHLOR  
6040 W 79TH ST.  
INDIANAPOLIS, IN 46278

AUTO-CHLOR  
6040 W 79TH ST.  
INDIANAPOLIS, IN 46278

AUTO-CHLOR  
6040 W 79TH ST.  
INDIANAPOLIS, IN 46278

BECKER FARMS  
7392 N. WILBUR WRIGHT RD.  
MOORELAND, IN 47360

BLUECART, INC.  
4970 GRAZING HILL ROAD  
SHINGLE SPRINGS, CA 95682

BMI  
10 MUSIC SQUARE EAST  
NASHVILLE, TN 37203

CAINE & WEINER  
12005 FORD RD. SUITE 300  
DALLAS, TX 75234

CAPITAL ONE  
PO BOX 30285  
SALT LAKE CITY, UT 84130

CHASE BANK  
PO BOX 6294  
CAROL STREAM, IL 60197

CHASE BANK  
PO BOX 6294  
CAROL STREAM, IL 60197

CHASE BANK  
PO BOX 6294  
CAROL STREAM, IL 60197

CHASE BANK  
PO BOX 6294  
CAROL STREAM, IL 60197

CHASE BANK  
PO BOX 6294  
CAROL STREAM, IL 60197

CHASE BANK  
PO BOX 6294  
CAROL STREAM, IL 60197

CHEF'S WAREHOUSE MIDWEST, LLC  
100 EAST RIDGE ROAD  
RIDGEFIELD, CT 06877

CHEF'S WAREHOUSE MIDWEST, LLC  
100 EAST RIDGE ROAD  
RIDGEFIELD, CT 06877

CHEF'S WAREHOUSE MIDWEST, LLC  
100 EAST RIDGE ROAD  
RIDGEFIELD, CT 06877

CHEF'S WAREHOUSE MIDWEST, LLC  
100 EAST RIDGE ROAD  
RIDGEFIELD, CT 06877

CINTAS  
6800 CINTAS BLVD.  
PO BOX 625737  
CINCINNATI, OH 45262

CINTAS  
6800 CINTAS BLVD.  
PO BOX 625737  
CINCINNATI, OH 45262

CITIZENS ENERGY GROUP  
2020 NORTH MERIDIAN ST  
INDIANAPOLIS, IN 46202



CLOUD FUND/DELTA FUNDING  
400 RELLA BLVD. SUITE 165-101  
SUFFERN, NY 10901

CONSERVE  
200 CROSSKEYS OFFICE PARK  
FAIRPORT, NY 14450

CORPORATE CREATIONS NETWORK INC.  
8520 ALLISON POINTE BLVD., #220  
INDIANAPOLIS, IN 46250

CORPORATE CREATIONS NETWORK INC.  
8520 ALLISON POINTE BLVD., #220  
INDIANAPOLIS, IN 46250

CORPORATE CREATIONS NETWORK INC.  
8520 ALLISON POINTE BLVD., #220  
INDIANAPOLIS, IN 46250

CORPORATE CREATIONS NEWTWORK, INC.  
8520 ALLISON POINTE BLVD., SUITE 220  
INDIANAPOLIS, IN 46250

CORPORATION SERVICE COMPANY  
PO BOX 2576  
SPRINGFIELD, IL 62708

CORPORATION SERVICE COMPANY  
801 ADLAI STEVENSON  
SPRINGFIELD, IL 62702

CORPORATION SERVICE COMPANY  
PO BOX 2576  
SPRINGFIELD, IL 62708

CORPORATION SERVICE COMPANY  
PO BOX 2576  
SPRINGFIELD, IL 62708

CORPORATION SERVICE COMPANY  
PO BOX 2576  
SPRINGFIELD, IL 62708

CORPORATION SERVICE COMPANY  
PO BOX 2576  
SPRINGFIELD, IL 62708

CREDIT KEY  
145 S. FAIRFAX AVENUE, SUITE 200  
LOS ANGELES, CA 90036

CT CORPORATION  
334 NORTH SENATE AVENUE  
INDIANAPOLIS, IN 46204

CT CORPORATION SYSTEM  
334 NORTH SENTATE AVENUE  
INDIANAPOLIS, IN 46204

CT CORPORATION SYSTEM  
334 NORTH SENATE AVENUE  
INDIANAPOLIS, IN 46204

CT CORPORATION SYSTEM  
334 NORTH SENATE AVENUE  
INDIANAPOLIS, IN 46204

CT CORPORATION SYSTEM  
330 N BRAND BLVD, SUITE 700  
GLENDALE, CA 91203

CT CORPORATION SYSTEM  
330 N BRAND BLVD, SUITE 700  
GLENDALE, CA 91203

DE LA FINCA COFFEE COMPANY LLC  
108 THOMAS MILL RD. SUITE 100  
HOLLY SPRINGS, NC 27540

FIRE INSPECTION

FNBO  
PO BOX 3128  
OMAHA, NE 68103

FNBO  
1601 CAPITAL AVENUE  
OMAHA, NE 68102

GREENBURG, GRANT AND RICHARDS  
5858 WESTHEIMER RD.  
SUITE 500  
HOUSTON, TX 77057

GURNEY J. BUSH INC.  
PO BOX 21398  
INDIANAPOLIS, IN 46221

HEADWAY CAPITAL  
175 W. JACKSON BLVD.  
SUITE 1000  
CHICAGO, IL 60604

INDIANA DEPARTMENT OF REVENUE  
100 NORTH SENATE AVENUE N-240 MS 108  
INDIANAPOLIS, IN 46204

INDIANA DEPARTMENT OF REVENUE  
100 NORTH SENATE AVENUE N-240 MS 108  
INDIANAPOLIS, IN 46204

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INDIANAPOLIS, IN 46204

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INDIANAPOLIS, IN 46204

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INDIANAPOLIS, IN 46204

INDIANA DEPARTMENT OF REVENUE  
100 NORTH SENATE AVENUE N-240 MS 108  
INDIANAPOLIS, IN 46204

INDY CHAMBER

INTERNAL REVENUE SERVICE  
575 N. PENNSYLVANIA STREET  
STOP SB380  
INDIANAPOLIS, IN 46204

INTERNAL REVENUE SERVICE  
575 N. PENNSYLVANIA STREET  
STOP SB380  
INDIANAPOLIS, IN 46204

INTUIT FINANCING INC.  
2700 COAST AVENUE  
MOUNTAIN VIEW, CA 94043

INTUIT FINANCING INC.  
2700 COAST AVENUE  
MOUNTAIN VIEW, CA 94043

JAMES D. AND SHARON HOWELL  
11928 DALTON ROAD  
LOSANTVILLE, IN 47354

JIM AND MELINDA ROBBINS  
1451 SOUTH LONGVIEW ST.  
BEAVERCREEK, OH 45432

LEVITON LAW FIRM LDT  
ONE PIERCE PLACE SUITE 725W  
ITASCA, IL 60143

LIBERTY MUTUAL  
PO BOX 188025  
FAIRFIELD, OH 45018

LIBERTY MUTUAL  
PO BOX 188025  
FAIRFIELD, OH 45018

LIBERTY MUTUAL  
PO BOX 188025  
FAIRFIELD, OH 45018

LIBERTY MUTUAL  
PO BOX 188025  
FAIRFIELD, OH 45018

LIBERTY MUTUAL  
PO BOX 188025  
FAIRFIELD, OH 45018

LINEBARGER GROAN BLAIR & SAMPSON LLP  
PO BOX 44008  
INDIANAPOLIS, IN 46244

MARION COUNTY TREASURER  
200 EAST WASHINGTON ST. SUITE 1001  
INDIANAPOLIS, IN 46204

MKR CPAS AND ADVISORS, LLC  
9957 CROSSPOINT BLVD.  
SUITE 100  
INDIANAPOLIS, IN 46256

NATIONAL FUNDING  
9530 TOWNE CENTRE DRIVE  
SAN DIEGO, CA 92121

NAVITAS CREDIT CORP.  
203 FORT WADE ROAD, SUITE 300  
PONTE VEDRA, FL 32081

NAVITAS CREDIT CORP.  
203 FORT WADE ROAD, SUITE 300  
PONTE VEDRA, FL 32081

NAVITAS CREDIT CORP.  
203 FORT WADE ROAD, SUITE 300  
PONTE VEDRA, FL 32081

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203 FORT WADE ROAD, SUITE 300  
PONTE VEDRA, FL 32081

NAVITAS CREDIT CORP.  
203 FORT WADE ROAD, SUITE 300  
PONTE VEDRA, FL 32081

NAVITAS CREDIT CORP.  
203 FORT WADE ROAD, SUITE 300  
PONTE VEDRA, FL 32081



NEAL WARNER  
325 CAMPBELL AVENUE  
INDIANAPOLIS, IN 46219

NEAL WARNER  
325 CAMPBELL AVENUE  
INDIANAPOLIS, IN 46219

NEIGHBORHOOD SELF-EMPLOYMENT INITIATIVE  
111 MONUMENT CIRCLE, SUITE 1950  
INDIANAPOLIS, IN 46204

NELSON ALARMS  
2602 EAST 55TH ST.  
INDIANAPOLIS, IN 46220

NEW LANE FINANCE  
123 SOUTH BROAD ST. 17TH FLOOR  
PHILADELPHIA, PA 19109

NEW LANE FINANCE  
123 SOUTH BROAD ST. 17TH FLOOR  
PHILADELPHIA, PA 19109

NEXTIVA, INC.  
PO BOX 207330  
DALLAS, TX 75320

NORTH STAR LEASING  
747 PINE ST. #201  
BURLINGTON, VT 05401

NORTH STAR LEASING  
747 PINE ST. #201  
BURLINGTON, VT 05401

NORTH STAR LEASING  
747 PINE ST. #201  
BURLINGTON, VT 05401

NORTH STAR LEASING  
747 PINE ST. #201  
BURLINGTON, VT 05401

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747 PINE ST. #201  
BURLINGTON, VT 05401

NORTH STAR LEASING  
747 PINE ST. #201  
BURLINGTON, VT 05401

NORTHWEST REGISTERED AGENT LLC  
5534 SAINT JOE ROAD  
FORT WAYNE, IN 46835

ONDECK CAPITAL  
1400 BROADWAY, 22ND FLOOR  
NEW YORK, NY 10018

PAUL WARNER  
328 N. LAYMAN AVENUE  
INDIANAPOLIS, IN 46219

PAUL WARNER  
328 N. LAYMAN AVENUE  
INDIANAPOLIS, IN 46219

PAUL WARNER  
328 N. LAYMAN AVENUE  
INDIANAPOLIS, IN 46219

PAUL WARNER  
328 N. LAYMAN AVENUE  
INDIANAPOLIS, IN 46219

PAUL WARNER  
328 N. LAYMAN AVENUE  
INDIANAPOLIS, IN 46219

PIAZZA PRODUCE  
5941 WEST 82ND ST.  
INDIANAPOLIS, IN 46278

PIAZZA PRODUCE  
5941 WEST 82ND ST.  
INDIANAPOLIS, IN 46278

PILLOW ROCK PROPERTY, LLC  
8421 EAST 450  
CARTHAGE, IN 46115

QUENCH USA, INC.  
630 ALLENDALE RD. SUITE 200  
KING OF PRUSSIA, PA 19406

QUICKBOOKS  
2700 COAST AVENUE  
MOUNTAIN VIEW, CA 94043

RITTER MANAGEMENT GROUP LLC  
471 S. RITTER AVENUE  
INDIANAPOLIS, IN 46219

RITTER MANAGEMENT GROUP LLC  
471 S. RITTER AVENUE  
INDIANAPOLIS, IN 46219

RMS  
PO BOX 500  
FOGELSVILLE, PA 18051

ROBERT WARNER  
6546 BAKER RD.  
HAGERSTOWN, IN 47346

SEQUIN ASSET SOLUTIONS LLC  
1130 NORTHCHASE PKWY. SUITE 150  
MARIETTA, GA 30067

SESAC  
35 MUSIC SQUARE EAST  
NASHVILLE, TN 37203

SPECTRUM  
240 N. DELAWARE ST.  
INDIANAPOLIS, IN 46204

SPECTRUM  
240 N. DELAWARE ST.  
INDIANAPOLIS, IN 46204

THE ATHENAEUM FOUNDATION, INC.  
CRAIG MINCE, PRESIDENT  
401 E. MICHIGAN STREET  
INDIANAPOLIS, IN 46204

THE ATHENAEUM FOUNDATION, INC.  
401 E. MICHIGAN STREET  
INDIANAPOLIS, IN 46204

THIRD STREET VENTURES, LLC  
6630 E. 75TH STREET, SUITE 214  
INDIANAPOLIS, IN 46250

TINKER T.A.B. L.L.C.  
1101 EAST 16TH FLOOR 2  
INDIANAPOLIS, IN 46202

TINKER TWG, LLC  
10 S. NEW NEW JERSEY, SUITE 310  
INDIANAPOLIS, IN 46204

TOAST, INC.  
401 PARK DRIVE, SITE 801  
BOSTON, MA 02215

TOAST, INC.  
401 PARK DRIVE, SITE 801  
BOSTON, MA 02215

TOAST, INC.  
401 PARK DRIVE, SITE 801  
BOSTON, MA 02215

TOAST, INC.  
401 PARK DRIVE, SITE 801  
BOSTON, MA 02215

U.S. SMALL BUSINESS ADMINISTRATION  
2 NORTH STREET, SUITE 320  
BIRMINGHAM, AL 35203

U.S. SMALL BUSINESS ADMINISTRATION  
2 NORTH STREET, SUITE 320  
BIRMINGHAM, AL 35203

U.S. SMALL BUSINESS ADMINISTRATION  
2 NORTH STREET  
BIRMINGHAM, AL 35203

UNITED COLLECTIONS BUREAU  
200 PATROL RD. SUITE 200  
JEFFERSONVILLE, IN 47130

WASTE MANAGEMENT  
200 S HARDING ST.  
INDIANAPOLIS, IN 46222

WASTE MANAGEMENT  
200 S HARDING ST.  
INDIANAPOLIS, IN 46222

WEBBANK, ITS SUCCESSORS AND ASSIGNEES  
215 SOUTH BANK STREET, SUITE 1000  
SALT LAKE CITY, UT 84111

WELTMANN, WEINBERG, REIS CO. LPA  
PO BOX 93596  
CLEVELAND, OH 44101

WHAT CHEF'S WANT  
940 WEST 5TH ST.  
CINCINNATI, OH 45203

WHAT CHEF'S WANT  
940 WEST 5TH ST.  
CINCINNATI, OH 45203

WHAT CHEF'S WANT  
940 WEST 5TH ST.  
CINCINNATI, OH 45203



**United States Bankruptcy Court  
Southern District of Indiana**

In re **Coat Check Coffee LLC**

Debtor(s)

Case No.

Chapter

**11**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Coat Check Coffee LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

**August 28, 2024**

Date

**/s/ Jason T. Mizzell**

**Jason T. Mizzell 30038-53**

Signature of Attorney or Litigant

Counsel for **Coat Check Coffee LLC**

**Kroger, Gardis & Regas, LLP**

**111 Monument Circle**

**Suite 900**

**Indianapolis, IN 46204**

**317-692-9000 Fax:317-264-6832**

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